11/19/2009 17:34

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For C	Other Than An Au	thorized Com	mittee		Office Use O	nly
NAME OF COMMITTEE (in full)		FEC MAILING LABEL YPE OR PRINT \$\foralle{\pi}\$	Example:If over the line	typing, type es			
Baxter Healthcare Pol	itical Action C	ommittee					
ADDRESS (number and str	eet)	01 K Street, NW		1			
Check if different than previously reported. (ACC)	t L	ite 375 			DC	2000	5
2. FEC IDENTIFICATIO	N NUMBER	▼ C	CITY 🛕		STATE	ZIP	CODE 🛕
C00117838		3.	IS THIS REPORT	NEW (N) OR		AMENDED A)	
4. TYPE OF REPOR (Choose One) (a) Quarterly Report		Due On:	eb 20 (M2) lar 20 (M3)	May 20 (M5)	H	ng 20 (M8) pp 20 (M9)	X Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
April 15	on out (O1)	A	pr 20 (M4)	Jul 20 (M7)	Oc	et 20 (M10)	Jan 31 (YE)
Quarterly Ri July 15 Quarterly Ri October 15 Quarterly Ri	eport(Q2)	(c) 12-Day PRE-Election Report for the:	Primary	y (12P) ntion (12C)	Genera		Runoff (12R)
January 31 Quarterly R		Elec	tion on				ate of
July 31 Mid- Report(Non Year Only) (Termination (TER)	-election (MY)	(d) 30-Day Post -Election Report for the:	General stion on	al (30G)	Runoff	in t	Special (30S)
5. Covering Period	10	01 2009	thro	ough 10	31	2009	
I certify that I have examine Type or Print Name of Trea		and to the best of my karah Creviston	nowledge and beli	ef it is true, correc	t and complete		
	Electronically	Filed by Sarah Crevi	ston		Date 1	1 19	2009
NOTE : Submission of fals	se, erroneous,	or incomplete informat	ion may subject the	e person signing th	nis Report to th	ne penalties of 2	2 U.S.C 437g.
Office Use						FEC FO	ORM 3X

FE6AN026

 $\textbf{A.} \hspace{0.2cm} \textbf{Form/Schedule}: \hspace{0.2cm} \textbf{F3X}$

Transaction ID:

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

3 / 106

Write or Type Committee Name Baxter Healthcare Political Action Committee

FEC Form 3X (Rev. 02/2003)

	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2009^{Y} Y		71894.25
	(b) Cash on Hand at Begining of Reporting Period	34738.74	
	(c) Total Receipts (from Line 19)	18760.15	131104.64
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	53498.89	202998.89
7.	Total Disbursements (from Line 31)	10150.00	159650.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	43348.89	43348.89
9.	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 4 / 106

Write or Type Committee Name

Baxter Healthcare Political Action Committee

Report Covering the Period:

From:

D D 0 1

^Y 2009

To:

м м 1 0 ^D 31

^Y 2009

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. C	ontributions (other than loans) From: a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	15264.75	96482.34
	(ii) Unitemized	3495.40	34622.30
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	18760.15	131104.64
(t	o) Political Party Committees	0.00	0.00
(c	(such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	18760.15	131104.64
	ransfers From Affiliated/Other arty Committees	0.00	0.00
3. A	Il Loans Received	0.00	0.00
	pan Repayments Received	0.00	0.00
(C	Refunds, Rebates, etc.) Carry Totals to Line 37, page 5) efunds of Contributions Made	0.00	0.00
to	Federal candidates and Other olitical Committees	0.00	0.00
	ther Federal Receipts Dividends, Interest, etc.)	0.00	0.00
	ransfers from Non-Federal and Levin Funds		
(a	a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b	b) Levin Funds (from Schedule H5)	0.00	0.00
(c	r) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	18760.15	131104.64
	otal Federal Receipts ubtract Line 18(c) from Line 19)	18760.15	131104.64

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

5 / 106

perating Expenditures: a) Shared Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share	0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 149000.00 0.00
Activity (from Schedule H4) (i) Federal Share	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 149000.00
(ii) Non-Federal Share	0.00 0.00 0.00 0.00	0.00 0.00 0.00 149000.00
c) Other Federal Operating Expenditures	0.00 0.00 0.00 0.00	0.00 0.00 0.00 149000.00
Expenditures	0.00 0.00 0.00	0.00 0.00 149000.00
(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
ommittees	0.00	149000.00
ontributions to ederal Candidates/Committeesnd other Political Committees idependent Expenditure use Schedule E)	0.00	149000.00
dependent Expenditure use Schedule E)ordinated Expenditures Made by Party	0.00	
use Schedule E)oordinated Expenditures Made by Party		0.00
oordinated Expenditures Made by Party ommittees (2 U.S.C. 441a(d)) use Schedule F)	0.00	
,	3.33	0.00
oan Repayments Made	0.00	0.00
	0.00	0.00
efunds of Contributions To:		
Than Political Committees	0.00	0.00
, , , , , , , , , , , , , , , , , , ,	0.00	0.00
(such as PACs)	0.00	0.00
Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
ther Disbursements	10150.00	10650.00
(from Schedule H6)	0.00	0.00
,	0.00	0.00
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Fotal Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	10150.00	159650.00
, , , , , , , , , , , , , , , , , , , ,	10150.00	159650.00
	Coans Made	Coan Repayments Made

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Expenditures			
33.	Total Contributions (other than loans) from Line 11(d), page 3)	18760.15	131104.64
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	18760.15	131104.64
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A	ny information copied from such Reports and for commercial purposes, other than using the	Statements may not be sold or used by any pene name and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	mmittee	
	Full Name (Last, First, Middle Initial) Joy A. Amundson		Date of Receipt
	Mailing Address 110 W. Onwentsia R DF1-2W		10 02 7 2009
	City Lake Forest	State Zip Code IL 60045	Transaction ID: 20091119111110-50
	FEC ID number of contributing federal political committee.	C 60045	Amount of Each Receipt this Period 223.08
	Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼	Occupation Cvp, President Bioscience Aggregate Year-to-Date ▼ 4876.96	
_	Full Name (Last, First, Middle Initial) Joy A. Amundson Mailing Address 110 W. Onwentsia R		Date of Receipt
	DF1-2W		10 16 2009
	City Lake Forest	State Zip Code IL 60045	Transaction ID: 2009111911211-51
	FEC ID number of contributing federal political committee.	C 60045	Amount of Each Receipt this Period 223.08
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Cvp, President Bioscience	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4876.96	
_	Full Name (Last, First, Middle Initial) Joy A. Amundson		Date of Receipt
	Mailing Address 110 W. Onwentsia R DF1-2W	oad	10 30 7 2009
	City Lake Forest	State Zip Code IL 60045	Transaction ID: 20091119113017-52
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 223.08
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Cvp, President Bioscience	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4876.96	
			669.24

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any per name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Com	nmittee	
Full Name (Last, First, Middle Initial) Peter J. Arduini		Date of Receipt
Mailing Address 1059 Warrington Road		10 02 2009
City Deerfield	State Zip Code IL 60015	Transaction ID: 20091119111110-55 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Cvp, Pres Medication Delivery	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2200.00	
Full Name (Last, First, Middle Initial) Peter J. Arduini		Date of Receipt
Mailing Address 1059 Warrington Road		10 16 2009
City Deerfield	State Zip Code IL 60015	Transaction ID: 2009111911211-56
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 100.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Cvp, Pres Medication Delivery	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2200.00	
Full Name (Last, First, Middle Initial) Peter J. Arduini		Date of Receipt
Mailing Address 1059 Warrington Road		10 30 YYYYY 10 30 2009
City Deerfield	State Zip Code IL 60015	Transaction ID: 20091119113017-57 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Cvp, Pres Medication Delivery	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2200.00	
SUBTOTAL of Receipts This Page (optional)		300.00
TOTAL This Period (last page this line number		·

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16 17
(Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Com	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. ∠ . .	Full Name (Last, First, Middle Initial) Robert H. Armstrong			Date of Receipt
	Mailing Address 133 Manchester Drive	Chaha	7:n Oada	10 02 2009
	City Waukesha	State WI	Zip Code 53188	Transaction ID: 20091119111110-59 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, R&D	n) Medical Devices	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1100.00	
- 3.	Full Name (Last, First, Middle Initial) Robert H. Armstrong			Date of Receipt
	Mailing Address 133 Manchester Drive			10 16 2009
	City	State	Zip Code	Transaction ID: 2009111911211-60
	Waukesha FEC ID number of contributing federal political committee.	C	53188	Amount of Each Receipt this Period 50.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, R&D	n) Medical Devices	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1100.00]
	Full Name (Last, First, Middle Initial) Robert H. Armstrong			Date of Receipt
	Mailing Address 133 Manchester Drive			10 30 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20091119113017-61
	Waukesha	WI	53188	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Baxter Healthcare Corporation Receipt For:		Medical Devices	
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
	SUBTOTAL of Receipts This Page (optional)			150.00
t	TOTAL This Period (last page this line number	only)		

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C	d Statements may not be sold or used by any perso the name and address of any political committee to ommittee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Robert G. Babicke		Date of Receipt
Mailing Address 162 Cardinal Drive City	State Zip Code	1 0 0 2 2 0 0 9 Transaction ID: 20091119111110-94
Hawthorn Woods	IL 60047	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Information Technology	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) Robert G. Babicke	1	Date of Receipt
Mailing Address 162 Cardinal Drive		10 16 2009
City	State Zip Code	Transaction ID: 2009111911211-96
Hawthorn Woods	IL 60047	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Information Technology	
Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) Robert G. Babicke		Date of Receipt
Mailing Address 162 Cardinal Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20091119113017-99
Hawthorn Woods	IL 60047	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Information Technology	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional)	75.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 106 (check only one) X 11a
\ \ \	ny information copied from such Reports and r for commercial purposes, other than using to NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	he name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
/	Full Name (Last, First, Middle Initial)	Jiiiiiiiiiiiiee		
۱.	Donald Arthur Baker Mailing Address 286 Whitworth			Date of Receipt 1 0 0 2 2 0 0 9
	City	State	Zip Code	Transaction ID: 20091119111110-148
	Thousand Oaks	CA	91360	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		69.79
	Name of Employer Baxter Healthcare Corpora- tion	Occupatio VP Ii, Qu		
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼		1519.24	
_	Full Name (Last, First, Middle Initial) Donald Arthur Baker			Date of Receipt
•	Mailing Address 286 Whitworth			10 16 2009
	City	State	Zip Code	Transaction ID: 2009111911211-154
	Thousand Oaks	CA	91360	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		69.79
	Name of Employer Baxter Healthcare Corpora- tion	Occupatio VP Ii, Qu		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1519.24	
_	Full Name (Last, First, Middle Initial) Donald Arthur Baker			Date of Receipt
	Mailing Address 286 Whitworth			10 30 Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20091119113017-159
	Thousand Oaks	CA	91360	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		69.79
	Name of Employer Baxter Healthcare Corpora- tion	Occupatio VP Ii, Qu	ality	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1519.24	
	SUBTOTAL of Receipts This Page (optional)			209.37

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and r for commercial purposes, other than using t	Statements may not be sold or used by any pene name and address of any political committee	
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	ommittee	
Full Name (Last, First, Middle Initial) Michael J. Baughman		Date of Receipt
Mailing Address 5343 N Lakewood Av	/enue	10 02 2009
City	State Zip Code	Transaction ID: 20091119111110-15
Chicago	IL 60640	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Baxter International Inc.	Occupation Cvp, Controller	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2200.00	
Full Name (Last, First, Middle Initial) Michael J. Baughman		Date of Receipt
Mailing Address 5343 N Lakewood Av	/enue	10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 2009111911211-160
Chicago	IL 60640	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Baxter International Inc.	Occupation Cvp, Controller	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2200.00	
Full Name (Last, First, Middle Initial) Michael J. Baughman		Date of Receipt
Mailing Address 5343 N Lakewood Av	venue	10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
City	State Zip Code	Transaction ID: 20091119113017-16
Chicago	IL 60640	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Baxter International Inc.	Occupation Cvp, Controller	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2200.00	
		300.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 106 (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may g the name and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action	Committee		
Full Name (Last, First, Middle Initial) Edwin A. Betancourt-Morales			Date of Receipt
Mailing Address 101 N E 3rd Avenu	ue, Ste 1600		10 02 2009
City Ft Lauderdale	State FL	Zip Code 33301	Transaction ID: 20091119111110-176 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		43.92
Name of Employer Baxter Export Corporation	Occupation VP, Mfg I	n _atin America	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 958.56	
Full Name (Last, First, Middle Initial) Edwin A. Betancourt-Morales	L		Date of Receipt
Mailing Address 101 N E 3rd Avenue	ue, Ste 1600		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Ft Lauderdale	State FL	Zip Code 33301	Transaction ID: 2009111911211-183 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		43.92
Name of Employer Baxter Export Corporation	Occupation VP Mfg I	atin America	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 958.56	
Full Name (Last, First, Middle Initial) Edwin A. Betancourt-Morales			Date of Receipt
Mailing Address 101 N E 3rd Avenu	ue, Ste 1600		10 30 7 2009
City Ft Lauderdale	State FL	Zip Code 33301	Transaction ID: 20091119113017-18 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		43.92
Name of Employer Baxter Export Corporation	Occupation VP, Mfg I	atin America	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 958.56	
SUBTOTAL of Receipts This Page (option	nal)		131.76

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any persodress of any political committee to	
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Com	mittee		
Full Name (Last, First, Middle Initial) William P. Botha			Date of Receipt
Mailing Address 2225 Robinson Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20091119111110-48
Redondo Beach	CA	90278	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer Baxter Healthcare Corpora-	Occupation	n ufacturing	
tion Receipt For:		e Year-to-Date	+
Primary General Other (specify) ▼	, iggregate	1125.00	
Full Name (Last, First, Middle Initial) William P. Botha			Date of Receipt
Mailing Address 2225 Robinson Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 2009111911211-49
Redondo Beach	CA	90278	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		75.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Man	n ufacturing	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1125.00	
Full Name (Last, First, Middle Initial) William P. Botha			Date of Receipt
Mailing Address 2225 Robinson Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20091119113017-5
Redondo Beach	CA	90278	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Man	n ufacturing	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1125.00	
SUBTOTAL of Receipts This Page (optional)			225.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15/106 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C	Committee		
Full Name (Last, First, Middle Initial) John J. Bratsakis			Date of Receipt
Mailing Address 2405 Trailside Lane)		10 02 2009
City Wauconda	State IL	Zip Code 60084	Transaction ID: 20091119111110-83 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupatio Bcu Sr V	n 'P, Business Devlp	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) John J. Bratsakis			Date of Receipt
Mailing Address 2405 Trailside Lane	;		10 16 2009
City Wauconda	State IL	Zip Code 60084	Transaction ID: 2009111911211-85 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00004	25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupatio Bcu Sr V	n 'P, Business Devlp	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) John J. Bratsakis			Date of Receipt
Mailing Address 2405 Trailside Lane)		10 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Wauconda	State IL	Zip Code 60084	Transaction ID: 20091119113017-8
FEC ID number of contributing federal political committee.	C	00004	Amount of Each Receipt this Period 25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupatio Bcu Sr V	n 'P, Business Devlp	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional	1		75.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16/106 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Full Name (Last, First, Middle Initial) Susan K. Brown			Date of Receipt
Mailing Address 917 Geneva St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Glendale	State CA	Zip Code 91207	Transaction ID: 20091119111110-18 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	01207	58.13
Name of Employer Baxter Healthcare Corpora- tion	Occupation Plant Ma		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1264.46	
Full Name (Last, First, Middle Initial) Susan K. Brown			Date of Receipt
Mailing Address 917 Geneva St			10 16 2009
City Glendale	State CA	Zip Code 91207	Transaction ID: 2009111911211-19
FEC ID number of contributing federal political committee.	C	91207	Amount of Each Receipt this Period 58.13
Name of Employer Baxter Healthcare Corpora- tion	Occupation Plant Ma		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1264.46]
Full Name (Last, First, Middle Initial) Susan K. Brown			Date of Receipt
Mailing Address 917 Geneva St			10 30 2009
City Glendale	State	Zip Code	Transaction ID: 20091119113017-1
FEC ID number of contributing federal political committee.	CA	91207	Amount of Each Receipt this Period 58.13
Name of Employer Baxter Healthcare Corpora- tion	Occupation Plant Ma		
Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 1264.46]
SUBTOTAL of Receipts This Page (optiona			174.39

SCHEDULE A (FEC Form	Use separate so for each categor Detailed Summa	ry of the
Any information copied from such Reports or for commercial purposes, other than us NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action	ng the name and address of any politica	d by any person for the purpose of soliciting contributions I committee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Sebastian J. Bufalino Mailing Address 1091 Pine Meado	ow Ct	Date of Receipt
City Vernon Hills	State Zip Code IL 60061	1 0 0 2 2 0 0 9 Transaction ID: 20091119111110-169 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc.	Occupation	51.96
Receipt For: Primary General Other (specify)	VP, Corporate Audit Aggregate Year-to-Date ▼	1134.00
Full Name (Last, First, Middle Initial) Sebastian J. Bufalino Mailing Address 1091 Pine Meado	ow Ct	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 2009111911211-176
Vernon Hills	IL 60061	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	51.96
Name of Employer Baxter International Inc.	Occupation VP, Corporate Audit	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	1134.00
Full Name (Last, First, Middle Initial) Sebastian J. Bufalino	•	Date of Receipt
Mailing Address 1091 Pine Meado	ow Ct	10 30 7 2009
City	State Zip Code	Transaction ID: 20091119113017-18
Vernon Hills FEC ID number of contributing federal political committee.	C 60061	Amount of Each Receipt this Period 51.96
Name of Employer Baxter International Inc.	Occupation VP, Corporate Audit	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	1134.00
SUBTOTAL of Receipts This Page (option	onal)	155.88

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 106 (check only one) X
Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may name and add	/ not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Com	nmittee		
Full Name (Last, First, Middle Initial) Donna Campagna			Date of Receipt
Mailing Address 30922 St Andrews Driv	/e		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20091119111110-3
Libertyville	<u>IL</u>	60048	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer Baxter Healthcare Corpora-	Occupation VP Infor	n mation Technology	1
tion Receipt For:	. '	Year-to-Date V	
Primary General Other (specify) ▼	, iggi ogale	775.00	
Full Name (Last, First, Middle Initial) Donna Campagna	I		Date of Receipt
Mailing Address 30922 St Andrews Driv	/e		M M / D D / Y Y Y Y Y Y Y 1 1 0 1 1 6 2 0 0 9
City	State	Zip Code	Transaction ID: 2009111911211-38
<u>Libertyville</u>	IL	60048	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Infor	n mation Technology	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 775.00	
Full Name (Last, First, Middle Initial) Donna Campagna			Date of Receipt
Mailing Address 30922 St Andrews Driv	/e		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20091119113017-3
Libertyville	IL	60048	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Infor	n mation Technology	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 775.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	······	120.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 106 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C	d Statements may not be sold or used by any persible name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dorothy C. Chao Mailing Address 1115 N Lincoln Aver City Park Ridge FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Receipt For: Primary General Other (specify)	State Zip Code IL 60068-2026 C Occupation Sr Tax Counsel Aggregate Year-to-Date 500.00	Date of Receipt 10 20 20 2009 Transaction ID: 96B88A6E05B16D97C0 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Edward K. Chess Mailing Address 5313 Abbey Drive City McHenry	State Zip Code IL 60050	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	Occupation Sr Director, Research Aggregate Year-to-Date ▼ 550.00	25.00
Full Name (Last, First, Middle Initial) Edward K. Chess Mailing Address 5313 Abbey Drive City	State Zip Code	Date of Receipt M
McHenry FEC ID number of contributing federal political committee.	IL 60050	Amount of Each Receipt this Period 25.00
Name of Employer Baxter Healthcare Corporation Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Sr Director, Research Aggregate Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional)	550.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 106 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Col	mmittee		
∠ A .	Full Name (Last, First, Middle Initial) Edward K. Chess			Date of Receipt
	Mailing Address 5313 Abbey Drive			10 30 2009
	City <u>McHenry</u>	State IL	Zip Code 60050	Transaction ID: 20091119113017-13 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Sr Direct	n or, Research	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
– В.	Full Name (Last, First, Middle Initial) Brian W. Clements			Date of Receipt
	Mailing Address 109 Juniper Way			10 30 4 2009
	City Lake Villa	State IL	Zip Code 60046	Transaction ID: 20091119113017-10 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, MD	n Supply Chain	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 210.00	
_ C.	Full Name (Last, First, Middle Initial) Edward M. Conrad			Date of Receipt
	Mailing Address 113 S Waverly PI			10 02 YYYYY 10 02 2009
	City Mt Prospect	State IL	Zip Code 60056	Transaction ID: 20091119111110-154 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		64.50
	Name of Employer Baxter International Inc.	Occupation Dir, Tax	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1409.52	
	SUBTOTAL of Receipts This Page (optional) .	1		104.50
t	TOTAL This Period (last page this line numbe			

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 106 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Commercial Purposes	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Edward M. Conrad Mailing Address 113 S Waverly PI			Date of Receipt
City Mt Prospect FEC ID number of contributing	State IL	Zip Code 60056	1 0 1 6 2 0 0 9 Transaction ID: 2009111911211-160 Amount of Each Receipt this Period
federal political committee. Name of Employer Baxter International Inc. Receipt For:	Occupation Dir, Tax	n • Year-to-Date ▼	64.50
Primary General Other (specify) ▼	Aggregate	1409.52	
Full Name (Last, First, Middle Initial) Edward M. Conrad Mailing Address 113 S Waverly PI			Date of Receipt 1 0 3 0 2 0 0 9
City	State	Zip Code	Transaction ID: 20091119113017-165
Mt Prospect FEC ID number of contributing federal political committee.	C	60056	Amount of Each Receipt this Period 64.50
Name of Employer Baxter International Inc.	Occupation Dir, Tax	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1409.52	
Full Name (Last, First, Middle Initial) Sarah L. Creviston	'		Date of Receipt
Mailing Address 23 Wynstone Way			10 02 2009
City	State	Zip Code	Transaction ID: 20091119111110-140
North Barrington FEC ID number of contributing federal political committee.	C	60010	Amount of Each Receipt this Period 103.21
Name of Employer Baxter Healthcare Corpora- tion Receipt For:		n ernment Affairs e Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate	2245.42	
SUBTOTAL of Receipts This Page (optiona	<u>'</u>		232.21

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 22 / 106 (check only one) X 11a 11b 11c 12
		Detailed Summary Page	13 14 15 16
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
NAME OF COMMITTEE (In Full)			
Baxter Healthcare Political Action C	Committee		
Full Name (Last, First, Middle Initial) Sarah L. Creviston			Date of Receipt
Mailing Address 23 Wynstone Way			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 2009111911211-14
North Barrington	IL	60010	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		103.21
Name of Employer Baxter Healthcare Corpora-	Occupatio	n	7
tion	VP, Gove	ernment Affairs	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	2245.42	
Full Name (Last, First, Middle Initial) Sarah L. Creviston			Date of Receipt
Mailing Address 23 Wynstone Way			10 30 2009
City	State	Zip Code	Transaction ID: 20091119113017-1
North Barrington	<u>IL</u>	60010	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		103.21
Name of Employer Baxter Healthcare Corpora- tion	Occupatio VP, Gove	n ernment Affairs	7
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼	33 3	2245.42	
Full Name (Last, First, Middle Initial) Margarita Cruz-casse			Date of Receipt
Mailing Address Calle Guama #70 N	Mansiones Los	Cedr	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20091119111110-1
Cayey	PR	00736	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.08
Name of Employer Baxter	Occupatio Dir, Logis		7
Receipt For:		e Year-to-Date ▼	7
Primary General Other (specify) ▼		1087.48]
SUBTOTAL of Receipts This Page (optional	n		256.50

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using	d Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C	Committee	
Full Name (Last, First, Middle Initial) Margarita Cruz-casse		Date of Receipt
Mailing Address Calle Guama #70 N		10 16 2009
City <u>Cayey</u>	State Zip Code PR 00736	Transaction ID: 2009111911211-192 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.08
Name of Employer Baxter	Occupation Dir, Logistics	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1087.48	
Full Name (Last, First, Middle Initial) Margarita Cruz-casse		Date of Receipt
Mailing Address Calle Guama #70 N		10 30 7 2009
City Cayey	State Zip Code PR 00736	Transaction ID: 20091119113017-198
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.08
Name of Employer Baxter	Occupation Dir, Logistics	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1087.48	
Full Name (Last, First, Middle Initial) Robert M. Davis		Date of Receipt
Mailing Address 21515 Hummingbird	d Court	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Kildeer	State Zip Code IL 60047	Transaction ID: 20091119111110-158 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	167.31
Name of Employer Baxter International Inc.	Occupation Cvp, CFO	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 3657.74	
SUBTOTAL of Receipts This Page (optional	l)	267.47
TOTAL This Period (last page this line numl	•	

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 24 / 106 (check only one)
II EMIZED RECEIP 15	Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports or for commercial purposes, other than us	s and Statements may not be sold or used by any perso ing the name and address of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Actio	n Committee	
Full Name (Last, First, Middle Initial) Robert M. Davis		Date of Receipt
Mailing Address 21515 Humming	bird Court	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 2009111911211-164
Kildeer	IL 60047	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	167.31
Name of Employer Baxter International Inc.	Occupation Cvp, CFO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3657.74	
Full Name (Last, First, Middle Initial) Robert M. Davis	1	Date of Receipt
Mailing Address 21515 Humming	bird Court	M M / D D / Y Y Y Y Y 1 1 0 3 0 2 0 0 9
City	State Zip Code	Transaction ID: 20091119113017-16
Kildeer	IL 60047	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	167.31
Name of Employer Baxter International Inc.	Occupation Cvp, CFO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3657.74	
Full Name (Last, First, Middle Initial) Scot J. Deathos		Date of Receipt
Mailing Address 28461 Hidden Hi	lls Blvd	10 02 2009
City	State Zip Code	Transaction ID: 20091119111110-10
Saugus	CA 91390	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	37.72
Name of Employer Baxter Healthcare Corpora- tion	Occupation Plant Mgr Ii	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	819.10]
	I	372.34

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 106 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co.	e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Scot J. Deathos Mailing Address 28461 Hidden Hills BI City Saugus FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)		Date of Receipt M
Full Name (Last, First, Middle Initial) Scot J. Deathos Mailing Address 28461 Hidden Hills BI City Saugus FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	vd State Zip Code CA 91390 C Occupation Plant Mgr Ii Aggregate Year-to-Date ▼ 819.10	Date of Receipt M M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Paul D. Estrem Mailing Address 325 Clarewood Circle City Grayslake FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60030 C Occupation VP, Fin & Strat Initiatives Aggregate Year-to-Date 1100.00	Date of Receipt M M M / D D / Y Y Y Y Y 1 0 2 2 0 0 9 Transaction ID: 20091119111110-45 Amount of Each Receipt this Period 50.00
SUBTOTAL of Receipts This Page (optional) .		125.44

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate scl for each category Detailed Summa	y of the (Check only one)
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C	the name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Paul D. Estrem Mailing Address 325 Clarewood Circ	اما	Date of Receipt
City Grayslake	State Zip Code IL 60030	1 0 1 6 2 0 0 9 Transaction ID: 2009111911211-46 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General	Occupation VP, Fin & Strat Initiatives Aggregate Year-to-Date ▼	50.00
Other (specify) Full Name (Last, First, Middle Initial) Paul D. Estrem Mailing Address 325 Clarewood Circ		Date of Receipt
City Grayslake FEC ID number of contributing federal political committee.	State Zip Code IL 60030	Transaction ID: 20091119113017-47 Amount of Each Receipt this Period 50.00
Name of Employer Baxter Healthcare Corporation Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation VP, Fin & Strat Initiatives Aggregate Year-to-Date	100.00
Full Name (Last, First, Middle Initial) Peter Etienne Mailing Address 189 Lions Court		Date of Receipt 1 0 0 2 2 0 0 9
City Lake Zurich FEC ID number of contributing federal political committee.	State Zip Code IL 60047	Transaction ID: 20091119111110-161 Amount of Each Receipt this Period 25.00
Name of Employer Baxter International Inc.	Occupation Sr Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	550.00
SUBTOTAL of Receipts This Page (optional)	125.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Κ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27/106 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C	Committee		
Full Name (Last, First, Middle Initial) Peter Etienne			Date of Receipt
Mailing Address 189 Lions Court			10 16 2009
City Lake Zurich	State IL	Zip Code 60047	Transaction ID: 2009111911211-167 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer Baxter International Inc.	Occupation Sr Couns		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) Peter Etienne			Date of Receipt
Mailing Address 189 Lions Court	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Lake Zurich	State IL	Zip Code 60047	Transaction ID: 20091119113017-17 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer Baxter International Inc.	Occupation Sr Couns		
Receipt For: Primary General Other (specify) ▼	'	e Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) Camille I. Farhat			Date of Receipt
Mailing Address 1052 Warrington Ro	oad		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City Deerfield	State IL	Zip Code 60015	Transaction ID: 20091119111110-64
FEC ID number of contributing federal political committee.	C	00013	Amount of Each Receipt this Period 50.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation GM, Bpt	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (optional			100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 106 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action	and Statements may not be sold or used by any perso g the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Camille I. Farhat Mailing Address 1052 Warrington F	Dood	Date of Receipt
City Deerfield FEC ID number of contributing	State Zip Code IL 60015	Transaction ID: 2009111911211-65 Amount of Each Receipt this Period 50.00
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	Occupation GM, Bpt Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) Camille I. Farhat Mailing Address 1052 Warrington F	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 20091119113017-66
Deerfield FEC ID number of contributing federal political committee.	IL 60015	Amount of Each Receipt this Period 50.00
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼	Occupation GM, Bpt Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) Alan E. Freedlund		Date of Receipt
Mailing Address 746 S. River Rd		10 02 2009
City	State Zip Code	Transaction ID: 20091119111110-79
Naperville FEC ID number of contributing federal political committee.	IL 60540	Amount of Each Receipt this Period 12.00
Name of Employer Baxter Healthcare Corpora- tion Receipt For:	Occupation VP, Information Technology Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	228.00	
SUBTOTAL of Receipts This Page (option	al)	112.00

SCHEDULE A (FECI	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 106 (check only one) X 11a
Any information copied from suc or for commercial purposes, other NAME OF COMMITTEE (In Baxter Healthcare Politic	er than using the name and a Full)	nay not be sold or used by any perso address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Alan E. Freedlund Mailing Address 746 S. R City Naperville FEC ID number of contributin federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary Gene Other (specify)	State IL G Occupat VP, Infi Aggrega	Zip Code 60540 tion ormation Technology ate Year-to-Date ▼	Date of Receipt 10 16 2009 Transaction ID: 2009111911211-80 Amount of Each Receipt this Period 12.00
Full Name (Last, First, Middle Alan E. Freedlund Mailing Address 746 S. R City Naperville FEC ID number of contributin federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary Gene Other (specify)	State IL G Occupat VP, Inf	Zip Code 60540	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Kevin E. Freeman Mailing Address 20982 But City Kildeer FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Receipt For: Primary Gene Other (specify)	State IL G Occupat VP, I F Aggrega		Date of Receipt M
SUBTOTAL of Receipts This P	age (optional))	49.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS Any information copied from such Reports and	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 106 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C	the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Kevin E. Freeman Mailing Address 20982 Buffalo Run		Date of Receipt
City	State Zip Code	1 0 1 6 2 0 0 9 Transaction ID: 2009111911211-161
Kildeer FEC ID number of contributing federal political committee.	IL 60047	Amount of Each Receipt this Period 25.00
Name of Employer Baxter International Inc.	Occupation VP, I Finance	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) B. Kevin E. Freeman		Date of Receipt
Mailing Address 20982 Buffalo Run City	State Zip Code	10 30 20001110112017.1CC
Kildeer	IL 60047	Transaction ID: 20091119113017-166 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter International Inc.	Occupation VP, I Finance	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) C. Valery E. Gallagher		Date of Receipt
Mailing Address 14334 Spring Meado	ow Court	10 02 7 2009
City <u>Green Oaks</u>	State Zip Code IL 60048	Transaction ID: 20091119111110-71 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	71.93
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, State Government Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1561.10	
SUBTOTAL of Receipts This Page (optional)	121.93

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 106 (check only one) X 11a 11b 11c 12
		, ,	13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using th	Statements magne name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
Baxter Healthcare Political Action Co	mmittee		
Full Name (Last, First, Middle Initial) Valery E. Gallagher			Date of Receipt
Mailing Address 14334 Spring Meadow	w Court		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 2009111911211-72
Green Oaks	IL	60048	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		71.93
Name of Employer Baxter Healthcare Corpora-	Occupatio	n	
tion	Dir, State	e Government Affairs	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		1561.10	
Full Name (Last, First, Middle Initial) Valery E. Gallagher			Date of Receipt
Mailing Address 14334 Spring Meadow	w Court		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20091119113017-7
Green Oaks	IL	60048	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		71.93
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, State	n e Government Affairs	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1561.10	
Full Name (Last, First, Middle Initial) Erin M. Gardiner			Date of Receipt
Mailing Address 2442 W. Carmen Ave	9.		10 02 7 7 9 9
City	State	Zip Code	Transaction ID: 20091119111110-1
Chicago	<u>IL</u>	60625	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer Baxter International Inc.	Occupatio Dir, Com	n Imunications	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	350.00]

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 106 (check only one) X
or for	information copied from such Reports and S r commercial purposes, other than using the IAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Com	name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
. <u>E</u>	ull Name (Last, First, Middle Initial) Frin M. Gardiner Mailing Address 2442 W. Carmen Ave.			Date of Receipt
<u>C</u>	Chicago	State IL	Zip Code 60625	1 0 1 6 2 0 0 9 Transaction ID: 2009111911211-165 Amount of Each Receipt this Period
fe —	EC ID number of contributing ederal political committee. Jame of Employer Baxter International Inc.	Occupatio	n	25.00
_	Receipt For: Primary General Other (specify)		munications e Year-to-Date ▼ 350.00]
E	ull Name (Last, First, Middle Initial) rin M. Gardiner Mailing Address 2442 W. Carmen Ave.	Date of Receipt 1 0 0 0 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		
C	City	State	Zip Code	Transaction ID: 20091119113017-170
<u>C</u>	Chicago	IL	60625	Amount of Each Receipt this Period
	C ID number of contributing leral political committee.			25.00
N B	lame of Employer Baxter International Inc.	Occupation Dir, Com	n munications	
R	leceipt For:	, ' ' ' 	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		350.00]
	ull Name (Last, First, Middle Initial) ames M. Gatling	Date of Receipt		
M	Mailing Address 391 Sherbrooke Court			M M / D D / Y Y Y Y Y 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	ity	State	Zip Code	Transaction ID: 20091119111110-16
	Crystal Lake	IL	60012	Amount of Each Receipt this Period
fe	EC ID number of contributing ederal political committee.	C		156.54
<u>tio</u>	lame of Employer Baxter Healthcare Corpora- on Receipt For:	. ' 	n bal Manufacturing Ops e Year-to-Date ▼	
	Primary General Other (specify) ▼	Ayyreyale	3423.88	
0115	BTOTAL of Receipts This Page (optional)			206.54

SCHEDULE A (FEC Forr ITEMIZED RECEIPTS	for each category of the	FOR LINE NUMBER: PAGE 33 / 106 (check only one) X 11a 11b 11c 12
	Detailed Summary Page	13 14 15 16
Any information copied from such Report for commercial purposes, other than	orts and Statements may not be sold or used by any person using the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Ac	tion Committee	
Full Name (Last, First, Middle Initial James M. Gatling		Date of Receipt
Mailing Address 391 Sherbrook	ke Court	M M / D D / Y Y Y Y Y Y 1 1 0 1 6 2 0 0 9
City	State Zip Code	Transaction ID: 2009111911211-17
Crystal Lake	IL 60012	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	156.54
Name of Employer Baxter Healthcare Corpora- tion	Occupation Cvp, Global Manufacturing Ops	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3423.88	
Full Name (Last, First, Middle Initial James M. Gatling	<u> </u>	Date of Receipt
Mailing Address 391 Sherbrook	xe Court	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20091119113017-13
Crystal Lake	IL 60012	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	156.54
Name of Employer Baxter Healthcare Corpora-	Occupation Cvp, Global Manufacturing Ops	
tion Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3423.88	
Full Name (Last, First, Middle Initial Arthur J. Gibson)	Date of Receipt
Mailing Address 3775 Riverly T	race	10 02 7 2009
City	State Zip Code	Transaction ID: 20091119111110-60
<u>Marietta</u>	GA 30067	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	53.17
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Environ, Health & Safety	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	1154.56	
	ptional)	366.25

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 106 (check only one) X			
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action	nd Statements may not be sold or used by any person g the name and address of any political committee to Committee	n for the purpose of soliciting contributions solicit contributions from such committee.			
Full Name (Last, First, Middle Initial) Arthur J. Gibson Mailing Address 3775 Riverly Trace	· · · · · · · · · · · · · · · · · · ·	Date of Receipt			
City Marietta FEC ID number of contributing	State Zip Code GA 30067	1 0 1 6 2 0 0 9 Transaction ID: 2009111911211-61 Amount of Each Receipt this Period 53.17			
Name of Employer Baxter Healthcare Corporation Receipt For: Primary Other (specify)	Occupation VP, Environ, Health & Safety Aggregate Year-to-Date 1154.56				
Full Name (Last, First, Middle Initial) Arthur J. Gibson Mailing Address 3775 Riverly Trace	,				
City Marietta FEC ID number of contributing federal political committee.	State Zip Code GA 30067	Transaction ID: 20091119113017-62 Amount of Each Receipt this Period 53.17			
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	Occupation VP, Environ, Health & Safety Aggregate Year-to-Date ▼ 1154.56				
Full Name (Last, First, Middle Initial) Susan C. Gould Mailing Address 580 N. Bank Lane	Date of Receipt				
City Lake Forest FEC ID number of contributing federal political committee.	State Zip Code IL 60045	1 0 3 0 2 0 0 9 Transaction ID: 20091119113017-11 Amount of Each Receipt this Period 50.00			
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	Occupation Sr Dir, Clinical Development Aggregate Year-to-Date 250.00				
	al)	156.34			

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 106 (check only one) X 11a
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Cor	nmittee		
A.	Full Name (Last, First, Middle Initial) William J. Gresham			Date of Receipt
	Mailing Address 909 Clinton Place	01-1-	7'- 0-1-	10 02 2009
	City <u>River Forest</u>	State IL	Zip Code 60305	Transaction ID: 20091119111110-170 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Baxter International Inc.	Occupatio Dir, Ethic	n cs & Compliance/Ehs	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
В.	Full Name (Last, First, Middle Initial) William J. Gresham			Date of Receipt
	Mailing Address 909 Clinton Place			10 16 2009
	City River Forest	State IL	Zip Code 60305	Transaction ID: 2009111911211-177 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Baxter International Inc.	Occupatio Dir, Ethic	n cs & Compliance/Ehs	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
C.	Full Name (Last, First, Middle Initial) William J. Gresham			
	Mailing Address 909 Clinton Place			10 30 YYYYY 10 30 2009
	City River Forest	State IL	Zip Code 60305	Transaction ID: 20091119113017-182 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Baxter International Inc.	Occupatio Dir, Ethic	n cs & Compliance/Ehs	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
	SUBTOTAL of Receipts This Page (optional)			75.00
	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 106 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Lawrence P. Guiheen		Date of Receipt
Mailing Address 1653 Vista Oaks Wa	У	10 02 2009
City	State Zip Code	Transaction ID: 20091119111110-6
Westlake Vilage	CA 91361	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer Baxter Healthcare Corpora-	Occupation	7
tion Receipt For:	President, Biopharmaceuticals	_
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 770.00	
Full Name (Last, First, Middle Initial) Lawrence P. Guiheen		Date of Receipt
Mailing Address 1653 Vista Oaks Wa	у	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 2009111911211-7
Westlake Vilage	CA 91361	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation President, Biopharmaceuticals	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 770.00	
Full Name (Last, First, Middle Initial) Lawrence P. Guiheen		Date of Receipt
Mailing Address 1653 Vista Oaks Wa	у	10 30 2009
City	State Zip Code	Transaction ID: 20091119113017-7
Westlake Vilage	CA 91361	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation President, Biopharmaceuticals	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 770.00	
SUBTOTAL of Receipts This Page (optional)	······	105.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	Statements may not be sold or used by any pers e name and address of any political committee to mmittee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Andrew C. Hayes Mailing Address 1620 Timber Woods City Libertyville FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Andrew C. Hayes Mailing Address 1620 Timber Woods City Libertyville FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	Lane State Zip Code L 60048 C Occupation Sr Dir, Marketing Aggregate Year-to-Date ▼	Date of Receipt 10 16 2009 Transaction ID: 2009111911211-86 Amount of Each Receipt this Period 64.22
Full Name (Last, First, Middle Initial) Andrew C. Hayes Mailing Address 1620 Timber Woods City Libertyville FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	Lane State Zip Code IL 60048 C Occupation Sr Dir, Marketing Aggregate Year-to-Date ▼ 1401.26	Date of Receipt 10 30 2009 Transaction ID: 20091119113017-89 Amount of Each Receipt this Period 64.22
SUBTOTAL of Receipts This Page (optional)		192.66

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 106 (check only one) X
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co.	mmittee		
Α.	Full Name (Last, First, Middle Initial) Leslie J. Herzog			Date of Receipt
	Mailing Address 816 Moseley Rd.			10 02 2009
	City <u>Hig</u> hland Park	State IL	Zip Code 60035	Transaction ID: 20091119111110-115 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		31.69
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Clini	on ical Data Mgmt	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 475.35	
В.	Full Name (Last, First, Middle Initial) Leslie J. Herzog			Date of Receipt
	Mailing Address 816 Moseley Rd.			10 16 2009
	City Highland Park	State IL	Zip Code	Transaction ID: 2009111911211-118
	FEC ID number of contributing federal political committee.	C	60035	Amount of Each Receipt this Period 31.69
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Clini	on ical Data Mgmt	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 475.35	
с. С.	Full Name (Last, First, Middle Initial) Leslie J. Herzog			Date of Receipt
	Mailing Address 816 Moseley Rd.			10 30 YYYYY 2009
	City	State	Zip Code	Transaction ID: 20091119113017-121
	Highland Park FEC ID number of contributing federal political committee.	C	60035	Amount of Each Receipt this Period 31.69
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Clini	on ical Data Mgmt	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 475.35	
	SUBTOTAL of Receipts This Page (optional)	1		95.07
Ì	TOTAL This Period (last page this line numbe	r only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 106 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Conference of the Committee of the	e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Robert J. Hombach Mailing Address 126 Homewood Aven City Libertyville FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Receipt For: Primary General	Ue State Zip Code IL 60048 C Occupation Cvp, Treasurer Aggregate Year-to-Date ▼	Date of Receipt M
Full Name (Last, First, Middle Initial) Robert J. Hombach Mailing Address 126 Homewood Aven City Libertyville FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Receipt For: Primary General	State Zip Code IL 60048 C Occupation Cvp, Treasurer Aggregate Year-to-Date	Date of Receipt 10 16 2009111911211-162 Amount of Each Receipt this Period 25.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Robert J. Hombach Mailing Address 126 Homewood Aven City Libertyville FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc.	State Zip Code IL 60048 C Occupation	Date of Receipt M
Baxter International Inc. Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) .	Cvp, Treasurer Aggregate Year-to-Date ▼ 550.00	75.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and State or for commercial purposes, other than using the r	atements may not be sold or used by any persor name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Comm	mittee	
Full Name (Last, First, Middle Initial) Gary W. Inglese		Date of Receipt
Mailing Address 9321 Waterside Court City	State Zip Code	10 02 2009 Transaction ID: 20091119111110-72
New Haven	IN 46774	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Healthcare Reimb	7
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	
Full Name (Last, First, Middle Initial) Gary W. Inglese		Date of Receipt
Mailing Address 9321 Waterside Court		10 16 2009
City	State Zip Code	Transaction ID: 2009111911211-73
New Haven	IN 46774	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Healthcare Reimb	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	
Full Name (Last, First, Middle Initial) Gary W. Inglese		Date of Receipt
Mailing Address 9321 Waterside Court		10 30 2009
City	State Zip Code	Transaction ID: 20091119113017-74
New Haven	IN 46774	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Healthcare Reimb	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	440.00	
SUBTOTAL of Receipts This Page (optional)		60.00
TOTAL This Period (last page this line number o		

SCHEDULE A (FEC ITEMIZED RECEIPT	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 106 (check only one) X
Any information copied from suc or for commercial purposes, oth NAME OF COMMITTEE (In Baxter Healthcare Politic	er than using the name and a Full)	nay not be sold or used by any perso address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Irene P. Jakimcius	e Initial)		Date of Receipt
Mailing Address 2208 We	esley Ave. State	Zip Code	10 02 2009 Transaction ID: 20091119111110-162
Evanston FEC ID number of contributing federal political committee.		60201	Amount of Each Receipt this Period 81.99
Name of Employer Baxter International Inc. Receipt For: Primary Gene Other (specify) ▼	Aggrega	tion General Counsel ate Year-to-Date ▼ 1786.02	
Full Name (Last, First, Middle Irene P. Jakimcius Mailing Address 2208 We	e Initial) esley Ave.		Date of Receipt 1 0 1 6 2 0 0 9
City	State	Zip Code	Transaction ID: 2009111911211-168
Evanston FEC ID number of contributing federal political committee.	ng C	60201	Amount of Each Receipt this Period 81.99
Name of Employer Baxter International Inc.	Occupat Assoc	tion General Counsel	
Receipt For: Primary Gene Other (specify) ▼	Aggrega	ate Year-to-Date ▼ 1786.02	
Full Name (Last, First, Middle Irene P. Jakimcius	e Initial)		Date of Receipt
	esley Ave.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Evanston	State IL	Zip Code 60201	Transaction ID: 20091119113017-173 Amount of Each Receipt this Period
FEC ID number of contribution federal political committee.		00201	81.99
Name of Employer Baxter International Inc.	Occupati Assoc	tion General Counsel	
Receipt For: Primary Gene Other (specify) ▼	Aggrega	ate Year-to-Date ▼ 1786.02	
SUBTOTAL of Receipts This F	L		245.97

Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Confull Name (Last, First, Middle Initial) Robert A. Johnson Mailing Address 31385 W Somerset City Green Oaks FEC ID number of contributing federal political committee.	rcle State Zip Code IL 60048	Date of Receipt Date of Receipt Transaction ID: 20091119111110-44 Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) Robert A. Johnson Mailing Address 31385 W Somerset Ci City Green Oaks FEC ID number of contributing	rcle State Zip Code IL 60048	10 02 2009 Transaction ID: 20091119111110-44
Robert A. Johnson Mailing Address 31385 W Somerset Ci City Green Oaks FEC ID number of contributing	State Zip Code IL 60048	10 02 2009 Transaction ID: 20091119111110-44
City Green Oaks FEC ID number of contributing	State Zip Code IL 60048	1 0 0 2 2 0 0 9 Transaction ID: 20091119111110-44
Green Oaks FEC ID number of contributing	IL 60048	
FEC ID number of contributing		
	C	25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP Ii, Manufacturing	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Robert A. Johnson		Date of Receipt
Mailing Address 31385 W Somerset Ci	rcle	10 16 7 2009
City Green Oaks	State Zip Code IL 60048	Transaction ID: 2009111911211-45
FEC ID number of contributing federal political committee.	C 60048	Amount of Each Receipt this Period 25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP Ii, Manufacturing	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Robert A. Johnson		Date of Receipt
Mailing Address 31385 W Somerset Ci	rcle	10 30 YYYYY 2009
City	State Zip Code	Transaction ID: 20091119113017-46
Green Oaks FEC ID number of contributing federal political committee.	IL 60048	Amount of Each Receipt this Period 25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP Ii, Manufacturing	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		75.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 106 (check only one) X 11a
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma ne name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	mmittee		
Α.	Full Name (Last, First, Middle Initial) Rob C. Keeley			Date of Receipt
	Mailing Address 22606 Bridle	Otata	7'- 0-1-	10 02 2009
	City <u>Kildeer</u>	State IL	Zip Code 60047	Transaction ID: 20091119111110-124 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Hd/0	n Crrt Marketing	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1094.12	
В.	Full Name (Last, First, Middle Initial) Rob C. Keeley			Date of Receipt
	Mailing Address 22606 Bridle			10 16 7 2009
	City Kildeer	State IL	Zip Code 60047	Transaction ID: 2009111911211-128 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00047	50.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Hd/0	n Crrt Marketing	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1094.12	
С.	Full Name (Last, First, Middle Initial) Rob C. Keeley			Date of Receipt
	Mailing Address 22606 Bridle			10 30 YYYYY 2009
	City Kildeer	State IL	Zip Code 60047	Transaction ID: 20091119113017-131 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00047	50.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Hd/0	n Crrt Marketing	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1094.12	
	SUBTOTAL of Receipts This Page (optional)			150.00
İ	TOTAL This Period (last page this line number	er only)		

SCHEDULE A (F	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from for commercial purpose	om such Reports and Statements res, other than using the name and	may not be sold or used by any perso address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTED Baxter Healthcare	EE (In Full) Political Action Committee		
Full Name (Last, First, Jane E. Kiernan	Middle Initial)		Date of Receipt
Mailing Address 525	West Roscoe , #3W		10 02 7 7 7 7 9
City Chicago	State IL	Zip Code 60657-3540	Transaction ID: 20091119111110-35 Amount of Each Receipt this Period
FEC ID number of confederal political commit			40.00
Name of Employer Baxter Healthcare Cor tion Receipt For: Primary Other (specify)	Aggreg General	al Manager, Iv Therapy ate Year-to-Date ▼	
Full Name (Last, First, Jane E. Kiernan Mailing Address 525	Middle Initial) 5 West Roscoe , #3W		Date of Receipt
City	State	Zip Code	1 0 1 6 2 0 0 9 Transaction ID: 2009111911211-36
Chicago	IL	60657-3540	Amount of Each Receipt this Period
FEC ID number of con federal political commit	tributing		40.00
Name of Employer Baxter Healthcare Cor tion	occupa pora- Genera	ation al Manager, Iv Therapy	
Receipt For: Primary Other (specify)	General Aggreg	ate Year-to-Date ▼ 1880.00	
Full Name (Last, First, Jane E. Kiernan	Middle Initial)		Date of Receipt
	5 West Roscoe , #3W		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20091119113017-37
Chicago FEC ID number of confederal political commit		60657-3540	Amount of Each Receipt this Period 40.00
Name of Employer Baxter Healthcare Cor tion Receipt For:	Genera	al Manager, Iv Therapy ate Year-to-Date ▼	
Primary Other (specify)	General 7	1880.00	
SUBTOTAL of Receipts	This Page (optional)		120.00
	page this line number only)	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co.	Statements may not be sold or used by any personal ename and address of any political committee to mmittee	
Full Name (Last, First, Middle Initial) Steve King Mailing Address 57 Harborside Way City Hawthorn Woods FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60047-8441 C Occupation VP, Talent Management Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Richard L. Kirkendall Mailing Address One Baxter Parkway City Deerfield FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60015 C Occupation VP Quality, Medication Delivery Aggregate Year-to-Date 375.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Richard L. Kirkendall Mailing Address One Baxter Parkway City Deerfield FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60015 C Occupation VP Quality,Medication Delivery Aggregate Year-to-Date 375.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		650.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 106 (check only one) X 11a
4	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Cor	nmittee		
Α.	Full Name (Last, First, Middle Initial) Richard L. Kirkendall			Date of Receipt
	Mailing Address One Baxter Parkway		7. 0. 1	10 30 2009
	City <u>Deerfield</u>	State IL	Zip Code 60015	Transaction ID: 20091119113017-133 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		75.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupatio VP Qual	n ity,Medication Delivery	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
— В.	Full Name (Last, First, Middle Initial) Marie G. Kissel			Date of Receipt
	Mailing Address 1 Baxter Pkwy c/o Ge C/O Gerald Lema	rald Lema		10 02 YYYY 2009
	City Deerfield	State IL	Zip Code 60015	Transaction ID: 20091119111110-172
	FEC ID number of contributing federal political committee.	C	00013	Amount of Each Receipt this Period 76.46
	Name of Employer Baxter World Trade Corpor- ation	Occupatio Away on	n Assignment	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1670.90	
_ C.	Full Name (Last, First, Middle Initial) Marie G. Kissel			Date of Receipt
	Mailing Address 1 Baxter Pkwy c/o Ge C/O Gerald Lema	rald Lema		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Deerfield	State IL	Zip Code 60015	Transaction ID: 2009111911211-179 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00013	76.46
	Name of Employer Baxter World Trade Corpor- ation		Assignment	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1670.90	
	SUBTOTAL of Receipts This Page (optional) .			227.92
卜	TOTAL This Period (last page this line number		<u> </u>	

Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may the name and add	not be sold or used by any perso	
		ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Baxter Healthcare Political Action C	ommittee		
Full Name (Last, First, Middle Initial) Marie G. Kissel			Date of Receipt
Mailing Address 1 Baxter Pkwy c/o G C/O Gerald Lema	ierald Lema		10 30 2009
City	State	Zip Code	Transaction ID: 20091119113017-184
Deerfield FEC ID number of contributing federal political committee.	C	60015	Amount of Each Receipt this Period 76.46
Name of Employer Baxter World Trade Corpor- ation	Occupation Away on	Assignment	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1670.90	
Full Name (Last, First, Middle Initial) John J. Kody			Date of Receipt
Mailing Address 330 Brampton Court	İ		10 16 2009
City	State	Zip Code	Transaction ID: 2009111911211-69
Lake Forest FEC ID number of contributing federal political committee.	C	60045	Amount of Each Receipt this Period 10.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Sales	s & Marketing	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 220.00]
Full Name (Last, First, Middle Initial) John J. Kody			Date of Receipt
Mailing Address 330 Brampton Court	İ		10 30 2009
City	State	Zip Code	Transaction ID: 20091119113017-70
Lake Forest	<u>IL</u>	60045	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer Baxter Healthcare Corpora- tion		& Marketing	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	
SUBTOTAL of Receipts This Page (optional))		96.46

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action	nd Statements may not be sold or used by any person g the name and address of any political committee to a	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Edward L. Lamb Mailing Address 1072 South Rockw City Gilbert FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corpora-	State Zip Code AZ 85296 C Occupation Dir, Information Technology	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
tion Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) Edward L. Lamb Mailing Address 1072 South Rockw City	State Zip Code	Date of Receipt M M
Gilbert FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	AZ 85296 C Occupation Dir, Information Technology Aggregate Year-to-Date ▼ 220.00	Amount of Each Receipt this Period 10.00
Full Name (Last, First, Middle Initial) Edward (Ted) A. Langan Mailing Address 450 East Watersid Unit 1702	e Drive Unit 1702	Date of Receipt 1 0 0 2 2 2 0 0 9
City Chicago FEC ID number of contributing federal political committee.	State Zip Code IL 60601	Transaction ID: 20091119111110-3 Amount of Each Receipt this Period 75.00
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼	Occupation VP Ii, Sales Aggregate Year-to-Date ▼ 1650.00	
SUBTOTAL of Receipts This Page (option	al)	95.00

SCHEDULE ITEMIZED I	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 106 (check only one) X 11a
or for commercial NAME OF CO	purposes, other than using the DMMITTEE (In Full)	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Baxter Heal	thcare Political Action Com	mittee		
Full Name (La Edward (Ted) A	st, First, Middle Initial) A. Langan			Date of Receipt
Mailing Addres	ss 450 East Waterside Dr Unit 1702	ive Unit 170	02	10 16 2009
City <u>Chicago</u>		State IL	Zip Code 60601	Transaction ID: 2009111911211-3 Amount of Each Receipt this Period
	er of contributing al committee.	C		75.00
Name of Empl Baxter Healtho tion	loyer care Corpora-	Occupatio VP Ii, Sa		
Receipt For: Primary Other (s	General pecify) ▼	Aggregate	e Year-to-Date ▼ 1650.00	
Full Name (La Edward (Ted) A	st, First, Middle Initial) A. Langan			Date of Receipt
Mailing Addres	ss 450 East Waterside Dr Unit 1702	ive Unit 170	02	10 30 7 9 9
City Chicago		State IL	Zip Code 60601	Transaction ID: 20091119113017-3
	er of contributing al committee.	C	00001	Amount of Each Receipt this Period 75.00
Name of Empl Baxter Healtho tion	loyer care Corpora-	Occupatio VP Ii, Sa		
Receipt For: Primary	General pecify) ▼	Aggregate	e Year-to-Date ▼ 1650.00	
Full Name (La Timothy P. Law	st, First, Middle Initial) vrence			Date of Receipt
	ss 876 Writer CT			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 20091119111110-136
Vernon Hills FEC ID number federal political	er of contributing	C	60061	Amount of Each Receipt this Period 58.10
Name of Empl Baxter Healthon	loyer care Corpora-	Occupatio VP Manu	n ufacturing Med Delivery	
Receipt For: Primary Other (s	General pecify) ▼	Aggregate	e Year-to-Date ▼ 1258.46	
CURTOTAL	Receipts This Page (optional)			208.10

Mailing Address 876 Writer CT City Vernon Hills IL 60061 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) FEC ID number of contributing federal political committee. Page of Employer Baxter Healthcare Corporation Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) FEC ID number of contributing federal political committee. Page of Employer Baxter Healthcare Corporation Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Jacopo Leonardi Mailing Address 319 E. Vincent Ct. City State Zip Code Transis Amount of Cocupation Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Jacopo Leonardi Mailing Address 319 E. Vincent Ct. City State Zip Code Transis Amount of Cocupation Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Jacopo Leonardi Mailing Address 319 E. Vincent Ct. City State Zip Code Transis Amount of Employer Baxter Healthcare Corpora- Primary General Occupation Primary General Other (specify) ▼ Primary General Other (specify) T Primary General Other (specify) T Primary General Other (specify) T Primary General Othe	NUMBER: PAGE 50 / 106 ly one) 11b 11c 12 14 15 16 11
Full Name (Last, First, Middle Initial) Timothy P. Lawrence Mailing Address 876 Writer CT City Vernon Hills FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation FEC ID number of contributing General Other (specify) ▼ Full Name (Last, First, Middle Initial) Timothy P. Lawrence Mailing Address 876 Writer CT City Vernon Hills FEC ID number of contributing federal political committee. City Vernon Hills FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Cupation VP Manufacturing Med Delivery Aggregate Year-to-Date ▼ Transi Amou Transi City Vernon Hills FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Jacopo Leonardi Mailing Address 319 E. Vincent Ct. City State Zip Code Transi Aggregate Year-to-Date ▼ Transi City Lake Bluff FEC ID number of contributing federal political committee. City Lake Bluff FEC ID number of contributing federal political committee. City Lake Bluff FEC ID number of contributing federal political committee. City Lake Bluff FEC ID number of contributing federal political committee. City Lake Bluff FEC ID number of contributing federal political committee. Cupation Cupation Cupation Cupation Source Full Marketing Cupation Source Amou Cupation Cupation Source Amou Cupation Source Amou Cupation Cupation Source Amou Cupation Cupatio	pose of soliciting contributions butions from such committee.
City Vernon Hills	of Receipt
Vernon Hills	16 2009
FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For:	nction ID: 2009111911211-140 nt of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Timothy P. Lawrence Mailing Address 876 Writer CT City State Zip Code IL 60061 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Jacopo Leonardi Mailing Address 319 E. Vincent Ct. City State Zip Code ITransi Lake Bluff Full Name (Last, First, Middle Initial) Jacopo Leonardi Mailing Address 319 E. Vincent Ct. City State Zip Code IL 60044 Transi Lake Bluff C Occupation State Zip Code IL 60044 Amou C Transi Lake Bluff C Occupation State Zip Code IL 60044 Amou C Occupation State Tip Code IL 60044 Amou II 0 Occupation State Tip Code II Co	58.10
Primary General Other (specify) ▼	
Mailing Address 876 Writer CT City State Zip Code Transi Vernon Hills IL 60061 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Jacopo Leonardi Mailing Address 319 E. Vincent Ct. State Zip Code Transi Aggregate Year-to-Date ▼ 1258.46 Date of Transi Aggregate Year-to-Date ▼ 1258.46 Date of Transi Aggregate Year-to-Date ▼ 1258.46 Date of Transi Aggregate Year-to-Date ▼ 1258.46 Date of Transi City State Zip Code Transi Lake Bluff IL 60044 Amou FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corpora- Name of Employer Baxter Healthcare Corpora- Occupation St. Dir, Marketing	
City State Zip Code Transi Vernon Hills IL 60061 Amou FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Jacopo Leonardi Mailing Address 319 E. Vincent Ct. City State Zip Code Transi Lake Bluff IL 60044 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corpora- Coccupation Occupation Pate of Contributing federal political committee. Occupation State Zip Code Transi C Cocupation State Zip Code Transi Amou Occupation State Zip Code Transi Amou Transi Amou Date of Contributing federal political committee. Name of Employer Baxter Healthcare Corpora- State Zip Code Transi Amou Occupation State Zip Code Transi Amou Transi Amou Transi Amou Transi Amou Transi Amou Transi Amou Transi Amou Transi Amou Transi Amou Transi Amou Transi Amou Transi Amou Transi Amou Transi Amou Transi Amou Transi Amou Transi Amou Transi Amou Transi Transi Amou Transi Tran	of Receipt
Vernon Hills IL 60061 Amou FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Pull Name (Last, First, Middle Initial) Jacopo Leonardi Mailing Address 319 E. Vincent Ct. City State Zip Code IL 60044 Amou Transa Lake Bluff IL 60044 Amou C Name of Employer Baxter Healthcare Corpora- Name of Employer Baxter Healthcare Corpora- Name of Employer Baxter Healthcare Corpora- Name of Employer Baxter Healthcare Corpora- Occupation Occupation Occupation Str. Dir. Marketing	30 7 2009
FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Jacopo Leonardi Mailing Address 319 E. Vincent Ct. City State Zip Code Lake Bluff IL 60044 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corpora- Name of Employer Baxter Healthcare Corpora- C Cupation VP Manufacturing Med Delivery Aggregate Year-to-Date ▼ I 1258.46 Date of Mailing Address 319 E. Vincent Ct.	action ID: 20091119113017-143
Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Jacopo Leonardi Mailing Address 319 E. Vincent Ct. City Lake Bluff FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corpora- Name of Employer Baxter Healthcare Corpora- Coccupation VP Manufacturing Med Delivery Aggregate Year-to-Date ▼ 1258.46 Date of Mailing Address 319 E. Vincent Ct. City Lake Bluff IL 60044 C Occupation C Coccupation State Zip Code Transa Amou C Occupation C Coccupation State Zip Code Transa Amou C Coccupation State Zip Code Transa Amou C C Name of Employer Baxter Healthcare Corpora- State Zip Code Transa Amou C C Coccupation State Zip Code Transa Amou C C Coccupation State Zip Code Transa Amou C C Coccupation State Zip Code Transa Amou C C Coccupation State Zip Code Transa Amou C	nt of Each Receipt this Period
Baxter Healthcare Corporation Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ 1258.46 Full Name (Last, First, Middle Initial) Jacopo Leonardi Mailing Address 319 E. Vincent Ct. City State Zip Code Lake Bluff IL 60044 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corpora- Name of Employer Baxter Healthcare Corpora- Occupation Sr Dir Marketing	58.10
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Jacopo Leonardi Mailing Address 319 E. Vincent Ct. City State Zip Code Lake Bluff IL 60044 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corpora- Name of Employer Baxter Healthcare Corpora- Aggregate Year-to-Date Table 1 Date of Code Transaction Code II C	
Mailing Address 319 E. Vincent Ct. City State Zip Code Transi Lake Bluff IL 60044 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corpora- Occupation Str Dir Marketing	
City State Zip Code Transa Lake Bluff IL 60044 Amou FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corpora- Occupation Sr Dir Marketing	of Receipt
Lake Bluff IL 60044 Amou FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corpora- Sr. Dir. Marketing	02 2009
FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corpora- Sr. Dir. Marketing	action ID: 20091119111110-123
Name of Employer Baxter Healthcare Corpora- Occupation Sr. Dir. Marketing	nt of Each Receipt this Period
	25.00
1011	
Receipt For: Primary Other (specify) Aggregate Year-to-Date 450.00	
SUBTOTAL of Receipts This Page (optional)	141.20

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 106 (check only one) X 11a 11b 11c 12
	nd Statements may not be sold or used by any perso g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action	Committee	
Full Name (Last, First, Middle Initial) Jacopo Leonardi		Date of Receipt
Mailing Address 319 E. Vincent Ct.	State Zip Code	10 16 2009
Lake Bluff	IL 60044	Transaction ID: 2009111911211-127 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Sr Dir, Marketing	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) Jacopo Leonardi	I	Date of Receipt
Mailing Address 319 E. Vincent Ct.		10 30 7 2009
City	State Zip Code	Transaction ID: 20091119113017-13
Lake Bluff FEC ID number of contributing federal political committee.	IL 60044	Amount of Each Receipt this Period 25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Sr Dir, Marketing	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	450.00	
Full Name (Last, First, Middle Initial) Raymond J. Linder		Date of Receipt
Mailing Address 246 Montclair Roa	d	M M / D D / Y Y Y Y Y Y 1 Y 1 D D D / Y 2 D D D D D D D D D D D D D D D D D D
City	State Zip Code	Transaction ID: 20091119111110-41
Vernon Hills	IL 60061	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	46.68
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, HR - Mfg/Supply Chain	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1011.12	
SURTOTAL of Receipts This Page (ention	al)	96.68

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Baxter Healthcare Political Action Cor	mmittee	
Full Name (Last, First, Middle Initial) Raymond J. Linder Mailing Address 246 Montclair Road		Date of Receipt
City	State Zip Code	1 0 1 6 2 0 0 9 Transaction ID: 2009111911211-42
Vernon Hills	IL 60061	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	46.68
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, HR - Mfg/Supply Chain	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1011.12	
Full Name (Last, First, Middle Initial) Raymond J. Linder		Date of Receipt
Mailing Address 246 Montclair Road		10 30 7 2009
City	State Zip Code	Transaction ID: 20091119113017-43
Vernon Hills	IL 60061	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	46.68
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, HR - Mfg/Supply Chain	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1011.12	
Full Name (Last, First, Middle Initial) Ronald K. Lloyd	1	Date of Receipt
Mailing Address 1694 Falling Star Ave.		10 02 7 2009
City	State Zip Code	Transaction ID: 20091119111110-39
Westlake Village	CA 91362	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Vpgm Biotherapeutic & Regn Med	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1100.00	
SUBTOTAL of Receipts This Page (optional)		143.36
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pe he name and address of any political committee	rson for the purpose of soliciting contributions
Baxter Healthcare Political Action Co	ommittee	
Full Name (Last, First, Middle Initial) Ronald K. Lloyd Mailing Address 1694 Falling Star Av	۵	Date of Receipt
		10 16 2009
City Westlake Village	State Zip Code CA 91362	Transaction ID: 2009111911211-40
FEC ID number of contributing federal political committee.	C 31302	Amount of Each Receipt this Period 50.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Vpgm Biotherapeutic & Regn Med	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) Ronald K. Lloyd Mailing Address 1604 Falling Star Av		Date of Receipt
Mailing Address 1694 Falling Star Av	e.	10 30 2009
City	State Zip Code	Transaction ID: 20091119113017-4
Westlake Village	CA 91362	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Baxter Healthcare Corpora-	Occupation Vpgm Biotherapeutic & Regn Med	
tion Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1100.00	
Full Name (Last, First, Middle Initial) Matthew A. Lykken		Date of Receipt
Mailing Address 421 North Wheaton	Ave	10 02 2009
City	State Zip Code	Transaction ID: 20091119111110-10
Wheaton	IL 60187	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter International Inc.	Occupation VP, Tax	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional)		125.00

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 106 (check only one) X
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person g the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Baxter Healthcare Political Action	Committee	
Full Name (Last, First, Middle Initial) Matthew A. Lykken		Date of Receipt
Mailing Address 421 North Wheato	on Ave	10 16 2009
City Wheaton	State Zip Code IL 60187	Transaction ID: 2009111911211-175 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter International Inc.	Occupation VP, Tax	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) Matthew A. Lykken		Date of Receipt
Mailing Address 421 North Wheato	on Ave	10 30 7 2009
City	State Zip Code IL 60187	Transaction ID: 20091119113017-180
Wheaton FEC ID number of contributing federal political committee.	IL 60187	Amount of Each Receipt this Period 25.00
Name of Employer Baxter International Inc.	Occupation VP, Tax	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) Jack Maniko	I	Date of Receipt
Mailing Address 116 Tennessee Av	venue NE	10 02 2009
City	State Zip Code	Transaction ID: 20091119111110-125
Washington FEC ID number of contributing	DC 20002	Amount of Each Receipt this Period
federal political committee.	C	30.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Fed Legislative Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	
SUBTOTAL of Receipts This Page (option	nal)	80.00

Any information copied from such Reports and Statements may not be sold or used or for commercial purposes, other than using the name and address of any political NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Committee Full Name (Last, First, Middle Initial) Jack Maniko Mailing Address 116 Tennessee Avenue NE City State Zip Code Washington DC 20002 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Jack Maniko Mailing Address 116 Tennessee Avenue NE City State Zip Code Washington DC 20002 FEC ID number of contributing federal political committee. City State Zip Code Washington DC 20002 FEC ID number of contributing federal political committee. City State Zip Code Magregate Year-to-Date ▼ Primary General Occupation Dir, Fed Legislative Affair: Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Michael E. Martin Mailing Address 10680 Red Leaf Circle City State Zip Code Lakewood IL 60014 FEC ID number of contributing federal political committee. C	committee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Jack Maniko Mailing Address 116 Tennessee Avenue NE City State Zip Code Washington DC 20002 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Jack Maniko Mailing Address 116 Tennessee Avenue NE City State Zip Code Washington DC 20002 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Crip Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Michael E. Martin Mailing Address 10680 Red Leaf Circle City State Zip Code IL 60014 FEC ID number of contributing	
A. Jack Maniko Mailing Address 116 Tennessee Avenue NE City State Zip Code Washington DC 20002 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Jack Maniko Mailing Address 116 Tennessee Avenue NE City State Zip Code Washington DC 20002 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Curupation Dir, Fed Legislative Affairs Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Michael E. Martin Mailing Address 10680 Red Leaf Circle City State Zip Code Lakewood IL 60014 FEC ID number of contributing	
City State Zip Code Washington DC 20002 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Jack Maniko Mailing Address 116 Tennessee Avenue NE City State Zip Code Washington DC 20002 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Occupation Dir, Fed Legislative Affair: Aggregate Year-to-Date ▼ Cult Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Michael E. Martin Mailing Address 10680 Red Leaf Circle City State Zip Code IL 60014 FEC ID number of contributing	Date of Receipt
Washington FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Jack Maniko Mailing Address 116 Tennessee Avenue NE City State Zip Code Washington FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Occupation Dir, Fed Legislative Affairs Aggregate Year-to-Date ▼ C C State Zip Code DC 20002 C C FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Michael E. Martin Mailing Address 10680 Red Leaf Circle City State Zip Code IL 60014 FEC ID number of contributing	10 16 2009
FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Jack Maniko Mailing Address 116 Tennessee Avenue NE City State Zip Code DC 20002 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Occupation Dir, Fed Legislative Affairs Aggregate Year-to-Date ▼ C Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Michael E. Martin Mailing Address 10680 Red Leaf Circle City State Zip Code IL 60014 FEC ID number of contributing	Transaction ID: 2009111911211-129 Amount of Each Receipt this Period
tion Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Jack Maniko Mailing Address 116 Tennessee Avenue NE City State Zip Code Washington DC 20002 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Michael E. Martin Mailing Address 10680 Red Leaf Circle City State Zip Code Dir, Fed Legislative Affair: Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Michael E. Martin Mailing Address 10680 Red Leaf Circle	30.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Jack Maniko Mailing Address 116 Tennessee Avenue NE City State Zip Code Washington DC 20002 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Michael E. Martin Mailing Address 10680 Red Leaf Circle City State Zip Code Lakewood IL 60014 FEC ID number of contributing	S
Jack Maniko Mailing Address 116 Tennessee Avenue NE City State Zip Code Washington DC 20002 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Occupation Dir, Fed Legislative Affairs Aggregate Year-to-Date ✓ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Michael E. Martin Mailing Address 10680 Red Leaf Circle City State Zip Code Lakewood IL 60014 FEC ID number of contributing	420.00
City State Zip Code Washington DC 20002 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Michael E. Martin Mailing Address 10680 Red Leaf Circle City State Zip Code Lakewood IL 60014 FEC ID number of contributing	Date of Receipt
Washington FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Michael E. Martin Mailing Address 10680 Red Leaf Circle City State Zip Code Lakewood IL 60014 FEC ID number of contributing	10 30 YYYY 2009
FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Michael E. Martin Mailing Address 10680 Red Leaf Circle City State Zip Code Lakewood IL 60014 FEC ID number of contributing	Transaction ID: 20091119113017-132
Baxter Healthcare Corporation Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial) Michael E. Martin Mailing Address 10680 Red Leaf Circle City Lakewood Lakewood FEC ID number of contributing	Amount of Each Receipt this Period 30.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Michael E. Martin Mailing Address 10680 Red Leaf Circle City State Zip Code Lakewood IL 60014 FEC ID number of contributing	S
Michael E. Martin Mailing Address 10680 Red Leaf Circle City State Zip Code Lakewood IL 60014 FEC ID number of contributing	420.00
City State Zip Code Lakewood IL 60014 FEC ID number of contributing	Date of Receipt
Lakewood IL 60014 FEC ID number of contributing	10 02 2009
FEC ID number of contributing	Transaction ID: 20091119111110-22
	Amount of Each Receipt this Period 78.40
Name of Employer Baxter Healthcare Corporation VP I, Mfg Strategic Planni	ing
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date 1	
SUBTOTAL of Receipts This Page (optional)	708.90

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedi for each category of Detailed Summary P	the (crieck only one)
<i>C</i>	or for commercial purposes, other than using the	statements may not be sold or used by a name and address of any political con	any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Cor	nmittee	
Α.	Full Name (Last, First, Middle Initial) Michael E. Martin		Date of Receipt
	Mailing Address 10680 Red Leaf Circle		10 16 2009
	City Lakewood	State Zip Code IL 60014	Transaction ID: 2009111911211-23 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	78.40
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP I, Mfg Strategic Planning	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
— В.	Full Name (Last, First, Middle Initial) Michael E. Martin		Date of Receipt
	Mailing Address 10680 Red Leaf Circle		10 30 2009
	City Lakewood	State Zip Code IL 60014	Transaction ID: 20091119113017-24
	FEC ID number of contributing federal political committee.	C 60014	Amount of Each Receipt this Period 78.40
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP I, Mfg Strategic Planning	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	3.90
_ C.	Full Name (Last, First, Middle Initial) Jeanne K. Mason		Date of Receipt
	Mailing Address 1760 Duffy Lane		10 02 2009
	City	State Zip Code	Transaction ID: 20091119111110-165
	Bannockburn FEC ID number of contributing federal political committee.	IL 60015	Amount of Each Receipt this Period 170.77
	Name of Employer Baxter International Inc.	Occupation Cvp, Human Resources	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	5.94
		<u> </u>	327.57

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 106 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Commercial Programmer (In Full)	d Statements may not be sold or used by any personant the name and address of any political committee to committee	
Full Name (Last, First, Middle Initial) Jeanne K. Mason Mailing Address 1760 Duffy Lane		Date of Receipt
City Bannockburn	State Zip Code IL 60015	Transaction ID: 2009111911211-171 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc.	Occupation Cvp, Human Resources	170.77
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3736.94	
Full Name (Last, First, Middle Initial) Jeanne K. Mason Mailing Address 1760 Duffy Lane		Date of Receipt 10 30 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
City	State Zip Code	Transaction ID: 20091119113017-176
Bannockburn FEC ID number of contributing federal political committee.	IL 60015	Amount of Each Receipt this Period 170.77
Name of Employer Baxter International Inc.	Occupation Cvp, Human Resources	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3736.94	
Full Name (Last, First, Middle Initial) Michael J. McAndrew Mailing Address 795 Foxmoor		Date of Receipt
City	State Zip Code	Transaction ID: 20091119111110-96
Lake Zurich FEC ID number of contributing federal political committee.	IL 60047	Amount of Each Receipt this Period 35.68
Name of Employer Baxter Healthcare Corpora- tion Receipt For:	Occupation Dir, Quality Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	778.72	
SUBTOTAL of Receipts This Page (optional	n	377.22

SCHEDULE A (FEC Form 3X	(1)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 58 / 106 (check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C	ommittee		
Full Name (Last, First, Middle Initial) Michael J. McAndrew			Date of Receipt
Mailing Address 795 Foxmoor			M M / D D / Y Y Y Y Y Y 1 1 0 1 6 2 0 0 9
City	State	Zip Code	Transaction ID: 2009111911211-98
Lake Zurich	IL	60047	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		35.68
Name of Employer Baxter Healthcare Corpora-	Occupation Dir, Qual		
tion Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼	33 (3.11)	778.72]
Full Name (Last, First, Middle Initial) Michael J. McAndrew			Date of Receipt
Mailing Address 795 Foxmoor			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20091119113017-10
Lake Zurich	<u> </u>	60047	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		35.68
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Qual		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 778.72	
Full Name (Last, First, Middle Initial) Kevin K. McCulloch			Date of Receipt
Mailing Address 730 Greenwood Ave	enue		10 16 2009
City	State	Zip Code	Transaction ID: 2009111911211-137
Wilmette	<u>IL</u>	60091-1748	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation GM, Glob	n bal Infusion Systems	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		220.00	
SUBTOTAL of Receipts This Page (optional			81.36

TOTAL This Period (last page this line number only)

	IEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 106 (check only one) X 11a
or for o	commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	ME OF COMMITTEE (In Full) exter Healthcare Political Action Cor	nmittee		
A. Ke	I Name (Last, First, Middle Initial) vin K. McCulloch			Date of Receipt
	iling Address 730 Greenwood Avenu		7'- 0-1-	10 30 2000
City <u>Wi</u>	y ilmette	State IL	Zip Code 60091-1748	Transaction ID: 20091119113017-140 Amount of Each Receipt this Period
	C ID number of contributing leral political committee.	C		10.00
Nai Ba: tior	me of Employer xter Healthcare Corpora- า	Occupation GM, Glo	n bal Infusion Systems	
Rec	ceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 220.00]
Bru	l Name (Last, First, Middle Initial) ice McGillivray			Date of Receipt
Ma	iling Address 151 Ridge Lane			10 02 2009
City		State	Zip Code	Transaction ID: 20091119111110-127
FE	ke Forest C ID number of contributing leral political committee.	C	60045	Amount of Each Receipt this Period 163.08
Nai Ba: tior	me of Employer xter Healthcare Corpora- 1	Occupation Cvp, Pre		
Red	ceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3573.92]
	I Name (Last, First, Middle Initial)			Date of Receipt
Ma	iling Address 151 Ridge Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	y ke Forest	State IL	Zip Code 60045	Transaction ID: 2009111911211-131
FE	C ID number of contributing eral political committee.	C	60045	Amount of Each Receipt this Period 163.08
<u>tior</u>		Occupation Cvp, Pre	s Renal	
Red	ceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3573.92	
SURT	FOTAL of Receipts This Page (optional)			336.16

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 106 (check only one) X
or for	commercial purposes, other than using the AME OF COMMITTEE (In Full)	e name and add	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	axter Healthcare Political Action Con	nmittee		
Bri	II Name (Last, First, Middle Initial) uce McGillivray			Date of Receipt
Ma 	ailing Address 151 Ridge Lane			10 30 7 2009
Cit La	ty ake Forest	State IL	Zip Code 60045	Transaction ID: 20091119113017-134 Amount of Each Receipt this Period
FE	C ID number of contributing deral political committee.	C		163.08
Na Ba tio	ame of Employer axter Healthcare Corpora- n	Occupatio Cvp, Pre		
	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3573.92	
	II Name (Last, First, Middle Initial)			Date of Receipt
Ma	ailing Address 3140 creswell dr			10 02 2009
Cit	•	State	Zip Code	Transaction ID: 20091119111110-111
FE	Ils church C ID number of contributing deral political committee.	C	22044	Amount of Each Receipt this Period 38.46
Na Ba tio	ame of Employer axter Healthcare Corpora- n	Occupatio Dir, Rena	n al Federal Leg Affairs	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 744.63	
	Il Name (Last, First, Middle Initial)			Date of Receipt
_	ailing Address 3140 creswell dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Cit	•	State	Zip Code	Transaction ID: 2009111911211-113
FE	Ils church C ID number of contributing deral political committee.	C	22044	Amount of Each Receipt this Period 38.46
<u>tio</u>		Occupatio Dir, Rena	n al Federal Leg Affairs	
	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 744.63	
SUB	TOTAL of Receipts This Page (optional)	1		240.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Com	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∆ .	Full Name (Last, First, Middle Initial) Kelli Mills Lester			Date of Receipt
	Mailing Address 3140 creswell dr City	State	Zip Code	1 0 3 0 2 0 0 9 Transaction ID: 20091119113017-116
	falls church FEC ID number of contributing federal political committee.	C	22044	Amount of Each Receipt this Period 38.46
	Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)		n al Federal Leg Affairs e Year-to-Date ▼ 744.63	
3.	Full Name (Last, First, Middle Initial) Barbara E. Morris Mailing Address 924 N. Saratoga Dr.			Date of Receipt 10 16 2009
	City	State	Zip Code	Transaction ID: 2009111911211-24
	Palatine FEC ID number of contributing federal political committee.	C	60074	Amount of Each Receipt this Period 10.00
	Name of Employer Baxter Healthcare Corpora- tion Receipt For:		Global Functions	
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 220.00]
-).	Full Name (Last, First, Middle Initial) Barbara E. Morris			Date of Receipt
	Mailing Address 924 N. Saratoga Dr.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Palatine	State IL	Zip Code 60074	Transaction ID: 20091119113017-25 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00074	10.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, HR	n · Global Functions	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 220.00	
	SUBTOTAL of Receipts This Page (optional)			58.46
	TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 106 (check only one) X 11a
Ar	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any pers name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
	Baxter Healthcare Political Action Com	nmittee	
4.	Full Name (Last, First, Middle Initial) Timothy J. Murphy		Date of Receipt
	Mailing Address 14601 N Somerset Circ		10 02 2009
	City Libertyville	State Zip Code IL 60048	Transaction ID: 20091119111110-134 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	29.10
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Assistant General Counsel	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 634.32	
 3.	Full Name (Last, First, Middle Initial) Timothy J. Murphy	Date of Receipt	
	Mailing Address 14601 N Somerset Circ	10 16 2009	
	City	State Zip Code	Transaction ID: 2009111911211-138
	Libertyville FEC ID number of contributing federal political committee.	IL 60048	Amount of Each Receipt this Period 29.10
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Assistant General Counsel	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 634.32	
 :.	Full Name (Last, First, Middle Initial) Timothy J. Murphy		Date of Receipt
	Mailing Address 14601 N Somerset Circ	10 30 2009	
	City	State Zip Code	Transaction ID: 20091119113017-141
	Libertyville FEC ID number of contributing federal political committee.	IL 60048	Amount of Each Receipt this Period 29.10
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Assistant General Counsel	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 634.32	
Г			87.30

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 106 (check only one) X
2	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may ne name and add	not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Baxter Healthcare Political Action Co	mmittee		
۸.	Full Name (Last, First, Middle Initial) Peter J. O'Malley Mailing Address 791 Summit Avenue			Date of Receipt
	Mailing Address 791 Summit Avenue City	State	Zip Code	10 02 2009 Transaction ID: 20091119111110-147
	Lake Forest	IL	60045	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		45.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Busi	n ness Alliances	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	7
	Other (specify) ▼	0 0	990.00	
 3.	Full Name (Last, First, Middle Initial) Peter J. O'Malley			Date of Receipt
	Mailing Address 791 Summit Avenue	10 16 2009		
	City	State	Zip Code	Transaction ID: 2009111911211-153
	Lake Forest	<u> L</u>	60045	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		45.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Busin	n ness Alliances	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	990.00	
 ;_	Full Name (Last, First, Middle Initial) Peter J. O'Malley			Date of Receipt
	Mailing Address 791 Summit Avenue			10 30 7 9 9 9
	City	State IL	Zip Code	Transaction ID: 20091119113017-158
	Lake Forest FEC ID number of contributing		60045	Amount of Each Receipt this Period
	federal political committee.	C		45.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Busi	n ness Alliances	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_
	Other (specify) ▼		990.00	
Г		1		135.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action	and Statements may not be sold or used by any person g the name and address of any political committee to Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Stasia L. Ogden Mailing Address 1750 W Cortland City Chicago FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60622 C Occupation Asst General Counsel, Patent Aggregate Year-to-Date 440.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Stasia L. Ogden Mailing Address 1750 W Cortland City Chicago FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60622 C Occupation Asst General Counsel, Patent Aggregate Year-to-Date 440.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Stasia L. Ogden Mailing Address 1750 W Cortland City Chicago FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60622 C Occupation Asst General Counsel, Patent Aggregate Year-to-Date 440.00	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (option	nal)	60.00

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 106 (check only one) X
or for con	nation copied from such Reports and Si imercial purposes, other than using the OF COMMITTEE (In Full) or Healthcare Political Action Com	name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	ame (Last, First, Middle Initial)	ee		
	w Olsofsky g Address 13065 Westport St			Date of Receipt M M D D Y Y Y Y Y Y Y Y
City Moor	park	State CA	Zip Code 93021	Transaction ID: 2009111911211-108 Amount of Each Receipt this Period
	O number of contributing political committee.	С		10.00
tion	of Employer Healthcare Corpora-	Occupatio Sr Mgr, F		
	ot For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 220.00	
. Matthe	ame (Last, First, Middle Initial) w Olsofsky g Address 13065 Westport St			Date of Receipt
City	13003 Westport St	State	Zip Code	10 30 2009
Moor	park	CA	93021	Transaction ID: 20091119113017-111 Amount of Each Receipt this Period
	O number of contributing political committee.	С		10.00
Baxter <u>tion</u>	of Employer Healthcare Corpora-	Occupatio Sr Mgr, F		
	ot For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 220.00]
	ame (Last, First, Middle Initial) Pasternak			Date of Receipt
Mailing	Address 1933 Oaktree Trl.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	N.P.H	State	Zip Code	Transaction ID: 2009111911211-76
	VIIIa Dinumber of contributing political committee.	C	60046	Amount of Each Receipt this Period 10.00
tion	of Employer Healthcare Corpora-	Occupatio Dir, R&D	n Program	
Receip	ot For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 220.00	
SUBTO	FAL of Receipts This Page (optional)	1		30.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 106 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Columns	e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Tim J. Pasternak Mailing Address 1933 Oaktree Trl. City Lake Villa FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60046 C Occupation Dir, R&D Program Aggregate Year-to-Date 220.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) John W. Percival Mailing Address 691 CYPRESS AVE City PASADENA FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code CA 91103 C Occupation Mgr, Research Aggregate Year-to-Date 459.06	Date of Receipt M
Full Name (Last, First, Middle Initial) John W. Percival Mailing Address 691 CYPRESS AVE City PASADENA FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code CA 91103 C Occupation Mgr, Research Aggregate Year-to-Date ▼ 459.06	Date of Receipt M M M 16 2009 Transaction ID: 2009111911211-117 Amount of Each Receipt this Period 21.12
SUBTOTAL of Receipts This Page (optional) .		52.24

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions
Baxter Healthcare Political Action Cor	nmittee		
Full Name (Last, First, Middle Initial) John W. Percival Mailing Address 691 CYPRESS AVE			Date of Receipt
Mailing Address 691 CYPRESS AVE			10 30 2009
City	State	Zip Code	Transaction ID: 20091119113017-12
PASADENA	CA	91103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		21.12
Name of Employer Baxter Healthcare Corpora- tion	Occupation Mgr, Res		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		459.06	
Full Name (Last, First, Middle Initial) Jed M. Perry			Date of Receipt
Mailing Address 5678 Kirkham Court			M M / D D / Y Y Y Y Y Y 1 1 0 2 2 0 0 9
City	State	Zip Code	Transaction ID: 20091119111110-12
Springfield	VA	22151	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Fed	ⁿ Legislative Affairs	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 450.00	1
Full Name (Last, First, Middle Initial)			Deta of Resoirt
Jed M. Perry Mailing Address 5678 Kirkham Court			Date of Receipt 1 0 1 6 2 0 0 9
City	State	Zip Code	Transaction ID: 2009111911211-12
<u>Springfield</u>	VA	22151	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Fed	n Legislative Affairs	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts This Page (optional)			71.12

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 106 (check only one) X 11a
_	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Baxter Healthcare Political Action Col	mmittee		
Α.	Full Name (Last, First, Middle Initial) Jed M. Perry Mailing Address 5678 Kirkham Court			Date of Receipt
	City	State	Zip Code	1 0 3 0 2 0 0 9 Transaction ID: 20091119113017-128
	Springfield	VA	22151	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Fed	on Legislative Affairs	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 450.00	
- В.	Full Name (Last, First, Middle Initial) Carla D. Pittman			Date of Receipt
	Mailing Address 3933 Kenway Avenue	10 02 2009		
	City	State	Zip Code	Transaction ID: 20091119111110-129
	Los Angeles	CA	90008	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		56.33
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Sr Couns		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		1229.12	
с. С.	Full Name (Last, First, Middle Initial) Carla D. Pittman			Date of Receipt
	Mailing Address 3933 Kenway Avenue			10 16 2009
	City	State	Zip Code	Transaction ID: 2009111911211-133
	Los Angeles	CA	90008	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		56.33
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Sr Couns	sel	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1229.12	
	SUBTOTAL of Receipts This Page (optional) .			137.66
	TOTAL This Period (last page this line numbe	r only)		

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 106 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	ne name and addr	not be sold or used by any persess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
/ Baxter Healthcare Political Action Co	mmuee		
Full Name (Last, First, Middle Initial) Carla D. Pittman			Date of Receipt
Mailing Address 3933 Kenway Avenue	10 30 7 2009		
City	State	Zip Code	Transaction ID: 20091119113017-13
Los Angeles	CA	90008	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		56.33
Name of Employer Baxter Healthcare Corpora- tion	Occupation Sr Counse	el e	
Receipt For:	Aggregate \	Year-to-Date ▼	
Primary General Other (specify) ▼		1229.12	
Full Name (Last, First, Middle Initial) Virginia L. Pringle			Date of Receipt
Mailing Address 6655 Bobby Jones Ct			10 02 7 9 9
City	State	Zip Code	Transaction ID: 20091119111110-29
Palmetto	FL	34221	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		33.45
Name of Employer Baxter Healthcare Corpora- tion	Occupation Mgr Ii, Op	erations	
Receipt For: Primary General Other (specify) ▼	Aggregate \	/ear-to-Date ▼ 730.02	
Full Name (Last, First, Middle Initial) Virginia L. Pringle			Date of Receipt
Mailing Address 6655 Bobby Jones C	t		10 16 2009
City	State	Zip Code	Transaction ID: 2009111911211-30
Palmetto	FL	34221	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		33.45
Name of Employer Baxter Healthcare Corpora- tion	Occupation Mgr Ii, Op	erations	
Receipt For: Primary General Other (specify) ▼	Aggregate \	Year-to-Date ▼ 730.02	
SUBTOTAL of Receipts This Page (optional)			123.23

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Columns	e name and addre	ot be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Virginia L. Pringle			Date of Receipt
Mailing Address 6655 Bobby Jones Ct	10 30 2009		
City	State	Zip Code	Transaction ID: 20091119113017-3
Palmetto	FL	34221	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		33.45
Name of Employer Baxter Healthcare Corpora- tion	Occupation Mgr Ii, Ope	rations	
Receipt For:	Aggregate Ye	ear-to-Date ▼	
Primary General Other (specify) ▼	0 0 0	730.02	
Full Name (Last, First, Middle Initial) Julie A. Quick			Date of Receipt
Mailing Address 3223 Epstein Circle			M M / D D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1
City	State	Zip Code	Transaction ID: 20091119111110-18
Mundelein	<u>IL</u>	60060	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		21.08
Name of Employer BioLife Plasma L.L.C.	Occupation Sr Mgr, Reg	g Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 457.76	
Full Name (Last, First, Middle Initial) Julie A. Quick			Date of Receipt
Mailing Address 3223 Epstein Circle			M M / D D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1
City	State	Zip Code	Transaction ID: 2009111911211-19
Mundelein	<u>IL</u>	60060	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		21.08
Name of Employer BioLife Plasma L.L.C.	Occupation Sr Mgr, Reg	g Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 457.76	
SUBTOTAL of Receipts This Page (optional) .	1		75.61

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Julie A. Quick		Date of Receipt
Mailing Address 3223 Epstein Circle		10 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Mundelein	State Zip Code IL 60060	Transaction ID: 20091119113017-19 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	21.08
Name of Employer BioLife Plasma L.L.C.	Occupation Sr Mgr, Reg Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 457.76	
Full Name (Last, First, Middle Initial) Janet L. Raciti	1	Date of Receipt
Mailing Address 19 Wimbledon Court	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 20091119111110-3
Lincolnshire FEC ID number of contributing federal political committee.	IL 60069	Amount of Each Receipt this Period 40.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Strategic Reimbursement	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00	
Full Name (Last, First, Middle Initial) Janet L. Raciti		Date of Receipt
Mailing Address 19 Wimbledon Court	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City Lincolnshire	State Zip Code IL 60069	Transaction ID: 2009111911211-33 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Strategic Reimbursement	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00	
SUBTOTAL of Receipts This Page (optional)		101.08

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Cor	e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Janet L. Raciti Mailing Address 19 Wimbledon Court City LincoInshire FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60069 C Occupation Dir, Strategic Reimbursement Aggregate Year-to-Date 880.00	Date of Receipt 10 30 2009 Transaction ID: 20091119113017-34 Amount of Each Receipt this Period 40.00
Full Name (Last, First, Middle Initial) Sundar Ramanan Mailing Address 1146 Azalea Way City Simi Valley FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code CA 93065 C Occupation Dir Tech Services, Pharma Aggregate Year-to-Date ▼ 295.70	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Sundar Ramanan Mailing Address 1146 Azalea Way City Simi Valley FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code CA 93065 C Occupation Dir Tech Services, Pharma Aggregate Year-to-Date 295.70	Date of Receipt M M J D D D Z D O D D D D D D D D D D D D D D
SUBTOTAL of Receipts This Page (optional) .		67.10

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Pag	(Crieck Grilly Grie)
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and address of any political comm	y person for the purpose of soliciting contributions littee to solicit contributions from such committee.
Baxter Healthcare Political Action Co	mmittee	
Full Name (Last, First, Middle Initial) Sundar Ramanan		Date of Receipt
Mailing Address 1146 Azalea Way		10 30 2009
City	State Zip Code	Transaction ID: 20091119113017-14
Simi Valley	CA 93065	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	13.55
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir Tech Services, Pharma	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	295.7	70
Full Name (Last, First, Middle Initial) David H. Resnicoff		Date of Receipt
Mailing Address 926 Valley Road		10 02 2009
City	State Zip Code	Transaction ID: 20091119111110-16
Glencoe FEC ID number of contributing federal political committee.	IL 60022	Amount of Each Receipt this Period 57.11
Name of Employer Baxter International Inc.	Occupation Assoc Gen Coun/VP Complian	ce
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1244.0	00
Full Name (Last, First, Middle Initial) David H. Resnicoff	1	Date of Receipt
Mailing Address 926 Valley Road		10 16 2009
City	State Zip Code	Transaction ID: 2009111911211-17
Glencoe	IL 60022	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	57.11
Name of Employer Baxter International Inc.	Occupation Assoc Gen Coun/VP Complian	се
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1244.0	00
SUBTOTAL of Receipts This Page (optional)	•	127.77

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 106 (check only one) X 11a
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Baxter Healthcare Political Action Col	mmittee		
Full Name (Last, First, Middle Initial) David H. Resnicoff			Date of Receipt
Mailing Address 926 Valley Road			10 30 2009
City	State	Zip Code	Transaction ID: 20091119113017-17
Glencoe	<u> </u>	60022	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		57.11
Name of Employer Baxter International Inc.	Occupation Assoc Ge	n en Coun/VP Compliance	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1244.00	
Full Name (Last, First, Middle Initial) Darwin Richardson			Date of Receipt
Mailing Address 3927 Corte Cancion			10 02 7 2009
City	State	Zip Code	Transaction ID: 20091119111110-49
Thousand Oaks	CA	91360	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir Ii, Qu		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 440.00]
Full Name (Last, First, Middle Initial) Darwin Richardson	1		Date of Receipt
Mailing Address 3927 Corte Cancion			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 2009111911211-50
Thousand Oaks	CA	91360	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir Ii, Qu	ality	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 440.00	
SUBTOTAL of Receipts This Page (optional) .			97.11

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any perso the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Baxter Healthcare Political Action C	Committee	_
Full Name (Last, First, Middle Initial) Darwin Richardson		Date of Receipt
Mailing Address 3927 Corte Cancior		10 30 7 2009
City <u>Thousand Oaks</u>	State Zip Code CA 91360	Transaction ID: 20091119113017-51 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir Ii, Quality	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	
Full Name (Last, First, Middle Initial) Jill A. Rowlison		Date of Receipt
Mailing Address 1280 21st St NW U Apt 906	nit 906	10 02 7 9 9
City	State Zip Code	Transaction ID: 20091119111110-88
Washington FEC ID number of contributing federal political committee.	DC 20036	Amount of Each Receipt this Period 22.69
Name of Employer Baxter Healthcare Corpora- tion	Occupation Mgr, Pac and Grassroots	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 468.96	
Full Name (Last, First, Middle Initial) Jill A. Rowlison		Date of Receipt
Mailing Address 1280 21st St NW U Apt 906	nit 906	10 16 2009
City	State Zip Code	Transaction ID: 2009111911211-90
Washington FEC ID number of contributing federal political committee.	DC 20036	Amount of Each Receipt this Period 22.69
Name of Employer Baxter Healthcare Corpora- tion	Occupation Mgr, Pac and Grassroots	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 468.96	
SUBTOTAL of Receipts This Page (optional	l)	65.38

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 106 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions
Baxter Healthcare Political Action Col	mmittee		
Full Name (Last, First, Middle Initial) Jill A. Rowlison			Date of Receipt
Mailing Address 1280 21st St NW Unit Apt 906	t 906		10 30 2009
City	State DC	Zip Code	Transaction ID: 20091119113017-93
Washington FEC ID number of contributing federal political committee.	C	20036	Amount of Each Receipt this Period 22.69
Name of Employer Baxter Healthcare Corpora- tion	Occupation Mgr, Pac	n c and Grassroots	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 468.96	
Full Name (Last, First, Middle Initial) Fredrick D. Ruda	1		Date of Receipt
Mailing Address 1316 Ashland Ave.			10 02 7 2009
City	State	Zip Code	Transaction ID: 20091119111110-46
Wilmette FEC ID number of contributing federal political committee.	C	60091	Amount of Each Receipt this Period
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Final	n nce Baxter Capital	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00]
Full Name (Last, First, Middle Initial) Fredrick D. Ruda			Date of Receipt
Mailing Address 1316 Ashland Ave.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 2009111911211-47
Wilmette FEC ID number of contributing federal political committee.	C	60091	Amount of Each Receipt this Period 10.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Final	n nce Baxter Capital	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional) .			42.69

Wilmette	MBER: PAGE 77 / 106 e) 11b 11c 12 14 15 16 11
A. Full Name (Last, First, Middle Initial) Fredrick D. Ruda Mailing Address 1316 Ashland Ave. City State Zip Code IL 60091 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corpora- tion Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Joseph Russo Mailing Address 27928 Periwinkle Lane City State Zip Code Transaction Amount of I FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corpora- tion Receipt For: Primary General City State Zip Code Transaction Coccupation Dir, Envir Health & Safety Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Joseph Russo Occupation Dir, Envir Health & Safety Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Joseph Russo Mailing Address 27928 Periwinkle Lane City State Zip Code Transaction Receipt For: Primary General City State Zip Code Transaction City State Zip Code Transaction Transaction Date of Rec 1 0 Transaction Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Joseph Russo Mailing Address 27928 Periwinkle Lane City State Zip Code Transaction Transaction Transaction Transaction Amount of I FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corpora- tion Dir, Envir Health & Safety Aggregate Year-to-Date ▼ Transaction Transaction Aggregate Year-to-Date ▼ Transaction Aggregate Year-to-Date ▼	of soliciting contributions on from such committee.
A Fredrick D. Ruda Mailing Address 1316 Ashland Ave. City Wilmette FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Joseph Russo Mailing Address 27928 Periwinkle Lane City Valencia FEC ID number of contributing federal political committee. City State Zip Code Transaction Aggregate Year-to-Date ▼ Transaction Transaction Transaction Transaction Cocupation Dir, Envir Health & Safety Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Joseph Russo Mailing Address 27928 Periwinkle Lane City State Zip Code CA 91354 Amount of I Transaction Transaction Transaction Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Joseph Russo Mailing Address 27928 Periwinkle Lane City State Zip Code CA 91354 Date of Rec M M M M M M M M M M M M M M M M M M M	
City Wilmette IL 60091 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation. Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Joseph Russo Name of Employer Baxter Safety FEC ID number of contributing federal political committee. City State Zip Code CA 91354 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation. Receipt For: Primary General Occupation Dir, Envir Health & Safety Full Name (Last, First, Middle Initial) Joseph Russo Mailing Address 27928 Periwinkle Lane City Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Joseph Russo Mailing Address 27928 Periwinkle Lane City State Zip Code CA 91354 Full Name (Last, First, Middle Initial) Joseph Russo Mailing Address 27928 Periwinkle Lane City State Zip Code CA 91354 Transaction Transaction Transaction Date of Rec Aggregate Year-to-Date ▼ Name of Employer Baxter Healthcare Corporation Dir, Envir Health & Safety Aggregate Year-to-Date ▼ Name of Employer Baxter Healthcare Corporation Dir, Envir Health & Safety Aggregate Year-to-Date ▼ Primary General Occupation Dir, Envir Health & Safety Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	ceipt
Wilmette IL 60091 Amount of I FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation. Raceipt For: Primary General 30 7 2009	
FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary	n ID: 20091119113017-48 Each Receipt this Period
tion Receipt For:	10.00
Primary General Other (specify) ▼ 300.00 Full Name (Last, First, Middle Initial) Joseph Russo Mailing Address 27928 Periwinkle Lane City State Zip Code Transaction Valencia CA 91354 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Joseph Russo Mailing Address 27928 Periwinkle Lane City State Zip Code Transaction Fec ID number of contributing federal political committee. City State Zip Code Transaction Valencia CA 91354 Full Name (Last, First, Middle Initial) Joseph Russo Mailing Address 27928 Periwinkle Lane City State Zip Code Transaction FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Baxter	
Mailing Address 27928 Periwinkle Lane City State Zip Code Transaction Valencia CA 91354 FEC ID number of contributing federal political committee. Name of Employer Baxter Health are Corporation Primary General City State Zip Code Transaction Amount of I C Pull Name (Last, First, Middle Initial) Joseph Russo Mailing Address 27928 Periwinkle Lane City State Zip Code Transaction City State Zip Code Transaction City State Zip Code Transaction City State Zip Code Transaction Ca 91354 Coccupation Date of Rec M M M 1 0 Transaction Transaction Coccupation Dir, Envir Health & Safety Amount of I C Name of Employer Baxter Healthcare Corporation Baxter Healthcare Corporation Dir, Envir Health & Safety Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Primary General	
City State Zip Code Transaction FEC ID number of contributing federal political committee. Name of Employer Baxter Health & Safety Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Joseph Russo Mailing Address 27928 Periwinkle Lane City State Zip Code Transaction FEC ID number of contributing federal political committee. City State Zip Code Transaction FEC ID number of contributing federal political committee. Name of Employer Baxter Health & Safety Receipt For: Name of Employer Baxter Health & C Name of Employer Baxter Health & Safety Receipt For: Primary General Occupation Dir, Envir Health & Safety Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	ceipt
Valencia CA 91354 Amount of I FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Joseph Russo Mailing Address 27928 Periwinkle Lane City State Zip Code Transaction FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Occupation Dir, Envir Health & Safety Aggregate Year-to-Date ▼ Amount of I Amount of I Amount of I Amount of I Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	02 7 2009
FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Joseph Russo Mailing Address 27928 Periwinkle Lane City State Zip Code Valencia CA 91354 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Occupation Dir, Envir Health & Safety Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	n ID: 20091119111110-137
Baxter Health & Safety Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Joseph Russo Mailing Address 27928 Periwinkle Lane City State Zip Code Valencia CA 91354 FEC ID number of contributing federal political committee. Name of Employer Baxter Health & Safety Name of Employer Baxter Health & Safety Receipt For: Primary General Dir, Envir Health & Safety Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	Each Receipt this Period 31.19
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Joseph Russo Mailing Address 27928 Periwinkle Lane City State Zip Code Valencia CA 91354 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Dir, Envir Health & Safety Receipt For: Primary General Amount of I Occupation Dir, Envir Health & Safety Aggregate Year-to-Date ▼	
Joseph Russo Mailing Address 27928 Periwinkle Lane City State Zip Code Valencia CA 91354 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Date of Rec M M M 1 0 Transaction Amount of I Occupation Dir, Envir Health & Safety Aggregate Year-to-Date ▼	
City State Zip Code Transaction Valencia CA 91354 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General 1 0 Transaction C Amount of I Final Care A Plant A Plant A Safety Aggregate Year-to-Date ▼	ceipt
Valencia CA 91354 Amount of I FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Dir, Envir Health & Safety Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General C Occupation Dir, Envir Health & Safety Aggregate Year-to-Date ▼	n ID: 2009111911211-141
Name of Employer Baxter Healthcare Corporation Receipt For: Primary Occupation Dir, Envir Health & Safety Aggregate Year-to-Date ▼	Each Receipt this Period 31.19
Receipt For: Aggregate Year-to-Date ▼ Primary General	
Other (specify) 680.24	
SUBTOTAL of Receipts This Page (optional)	72.38

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 78 / 106 (check only one) X 11a
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action	and Statements may not be sold or used by any persong the name and address of any political committee to	
Full Name (Last, First, Middle Initial) Joseph Russo Mailing Address 27928 Periwinkle L	_ane	Date of Receipt
City Valencia FEC ID number of contributing	State Zip Code CA 91354	Transaction ID: 20091119113017-144 Amount of Each Receipt this Period 31.19
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	Occupation Dir, Envir Health & Safety Aggregate Year-to-Date 680.24	
Full Name (Last, First, Middle Initial) Roibin Ryan Mailing Address 1419 W Berteau		Date of Receipt 1 0 0 2 2 0 0 9
City Chicago FEC ID number of contributing	State Zip Code IL 60613	Transaction ID: 20091119111110-163 Amount of Each Receipt this Period 99.41
Name of Employer Baxter International Inc. Receipt For:	Occupation Deputy Gen Counsel, Lit & Empl Aggregate Year-to-Date ▼	
Primary General Other (specify) Full Name (Last, First, Middle Initial) Roibin Ryan	2166.80	Date of Receipt
Mailing Address 1419 W Berteau		10 16 YYYYY
City Chicago FEC ID number of contributing federal political committee.	State Zip Code IL 60613 C	Amount of Each Receipt this Period 99.41
Name of Employer Baxter International Inc.	Occupation Deputy Gen Counsel, Lit & Empl	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2166.80	
SUBTOTAL of Receipts This Page (option	al)	230.01

SCHEDULE A (FEC Form 3X FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any pers he name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
Baxter Healthcare Political Action Co	ommittee	
Full Name (Last, First, Middle Initial) Roibin Ryan		Date of Receipt
Mailing Address 1419 W Berteau		10 30 2009
City	State Zip Code	Transaction ID: 20091119113017-1
Chicago	IL 60613	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	99.41
Name of Employer Baxter International Inc.	Occupation Deputy Gen Counsel, Lit & Empl	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2166.80	
Full Name (Last, First, Middle Initial) James K. Saccaro	_1	Date of Receipt
Mailing Address Baxter Expat Admin PO Box 747	PO Box 747	10 02 7 7 7 9
City	State Zip Code	Transaction ID: 20091119111110-1
Deerfield	IL 60015	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	54.38
Name of Employer Baxter World Trade Corpor- ation	Occupation Away on Assignment	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1181.72	
Full Name (Last, First, Middle Initial) James K. Saccaro		Date of Receipt
Mailing Address Baxter Expat Admin PO Box 747	PO Box 747	10 16 2009
City	State Zip Code	Transaction ID: 2009111911211-18
Deerfield	IL 60015	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	54.38
Name of Employer Baxter World Trade Corpor- ation	Occupation Away on Assignment	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1181.72	
		208.17

	EHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 106 (check only one)
Any or fo	rinformation copied from such Reports and Stor commercial purposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
\	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Com	mittee		
	Full Name (Last, First, Middle Initial) James K. Saccaro			Date of Receipt
-	Mailing Address Baxter Expat Admin PC PO Box 747	Box 747		10 30 2009
	City Deerfield	State IL	Zip Code 60015	Transaction ID: 20091119113017-186 Amount of Each Receipt this Period
	FEC ID number of contributing rederal political committee.	C		54.38
	Name of Employer Baxter World Trade Corpor- ation	Occupatio Away on	n Assignment	
I	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1181.72	
	Full Name (Last, First, Middle Initial) David P. Scharf			Date of Receipt
1	Mailing Address 931 Oak Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Winnetka	State IL	Zip Code 60093	Transaction ID: 20091119111110-16 Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		81.73
Ī	Name of Employer Baxter International Inc.	Occupatio Cvp, Cor	n p Secretary, Deputy Gc	
Ī	Receipt For: Primary General Other (specify) ▼	· · · · · · · · · · · · · · · · · · ·	e Year-to-Date ▼ 1506.86	
	Full Name (Last, First, Middle Initial) David P. Scharf			Date of Receipt
-	Mailing Address 931 Oak Street			M M / D D / Y Y Y Y Y Y 1 1 0 1 6 2 0 0 9
	City Winnetka	State IL	Zip Code 60093	Transaction ID: 2009111911211-166 Amount of Each Receipt this Period
- I	FEC ID number of contributing ederal political committee.	C		81.73
1	Name of Employer Baxter International Inc.	Occupatio Cvp, Cor	n p Secretary, Deputy Gc	
Í	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1506.86	
SU	BTOTAL of Receipts This Page (optional)			217.84

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 106 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	ne name and addr	not be sold or used by any perso ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
/ Baxter Healthcare Folitical Action Co	mmuee		
Full Name (Last, First, Middle Initial) David P. Scharf Mailing Address 931 Oak Street			Date of Receipt
			10 30 2009
City	State	Zip Code	Transaction ID: 20091119113017-17
Winnetka	<u>IL</u>	60093	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		81.73
Name of Employer Baxter International Inc.	Occupation Cvp, Corp	Secretary, Deputy Gc	
Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 1506.86]
Full Name (Last, First, Middle Initial) Chandra Sekhar			Date of Receipt
Mailing Address 1621 Mission Hills Ro Unit 211	d Unit 211		10 / 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State 	Zip Code	Transaction ID: 20091119111110-4
Northbrook	<u> L</u>	60062	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		58.78
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP Ii, Mfg	Strategic Planning	
Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 1276.36]
Full Name (Last, First, Middle Initial) Chandra Sekhar			Date of Receipt
Mailing Address 1621 Mission Hills Ro Unit 211	d Unit 211		10 16 2009
City	State	Zip Code	Transaction ID: 2009111911211-4
Northbrook	<u>IL</u>	60062	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		58.78
Name of Employer Baxter Healthcare Corpora- tion	- ' 	Strategic Planning	
Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 1276.36	
SUBTOTAL of Receipts This Page (optional)	•		199.29

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82 / 106 (check only one) X 11a
An	y information copied from such Reports and Si for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	Baxter Healthcare Political Action Com	ımittee		
١.	Full Name (Last, First, Middle Initial) Chandra Sekhar			Date of Receipt
	Mailing Address 1621 Mission Hills Rd Unit 211	Unit 211		10 30 7 2009
	City Northbrook	State IL	Zip Code 60062	Transaction ID: 20091119113017-4 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00002	58.78
	Name of Employer Baxter Healthcare Corpora- tion	Occupatio VP Ii, Mf	n g Strategic Planning	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1276.36]
	Full Name (Last, First, Middle Initial) John P. Shannon			Date of Receipt
	Mailing Address 432 Utley			10 02 7 2009
	City	State IL	Zip Code	Transaction ID: 20091119111110-145
	Elmhurst FEC ID number of contributing federal political committee.	C	60126	Amount of Each Receipt this Period 54.86
	Name of Employer Baxter Healthcare Corpora- tion	Occupatio VP Ii, Ma		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1192.76]
_	Full Name (Last, First, Middle Initial) John P. Shannon			Date of Receipt
	Mailing Address 432 Utley			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 2009111911211-150
	Elmhurst FEC ID number of contributing federal political committee.	C	60126	Amount of Each Receipt this Period 54.86
	Name of Employer Baxter Healthcare Corpora- tion	Occupatio VP Ii, Ma		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1192.76	
SI	JBTOTAL of Receipts This Page (optional)			168.50
	OTAL This Period (last page this line number)			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 106 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pers ne name and address of any political committee to	on for the purpose of soliciting contributions
Baxter Healthcare Political Action Co	ommittee	
Full Name (Last, First, Middle Initial) John P. Shannon Mailing Address 432 Utley		Date of Receipt
Mailing Address 432 Utley City	State Zip Code	1 0 3 0 2 0 0 9 Transaction ID: 20091119113017-154
Elmhurst	IL 60126	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	54.86
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP Ii, Marketing	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1192.76	
Full Name (Last, First, Middle Initial) Terry (John) Simmons		Date of Receipt
Mailing Address 1013 Windhaven Ro	ad	10 30 2009
City	State Zip Code	Transaction ID: 20091119113017-150
Libertyville	IL 60048	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Global Purchasing	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) Lori E. Sims		Date of Receipt
Mailing Address 66 Cooper Drive		10 02 7 2009
City Glastonbury	State Zip Code CT 06033	Transaction ID: 20091119111110-93
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	22.39
Name of Employer Baxter Healthcare Corpora-	Occupation Mgr, State Government Affairs	
tion Receipt For:	Aggregate Year-to-Date ▼	-
Primary General	488.98	7
Other (specify) ▼	100.00	
SUBTOTAL of Receipts This Page (optional)		92.25
TOTAL This Period (last page this line number	er only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	Statements may not be sold or used by any personal statements and address of any political committee to mmittee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Lori E. Sims Mailing Address 66 Cooper Drive City Glastonbury FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code CT 06033 C Occupation Mgr, State Government Affairs Aggregate Year-to-Date 488.98	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Lori E. Sims Mailing Address 66 Cooper Drive City Glastonbury FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code CT 06033 C Occupation Mgr, State Government Affairs Aggregate Year-to-Date 488.98	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Deborah G. Spak Mailing Address 1555 Stratford City Deerfield FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Receipt For: Primary General Other (specify)	State Zip Code IL 60015 C Occupation Dir, Communications Aggregate Year-to-Date 294.42	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)		58.34

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C	d Statements may not be sold or used by any personal statements may not be sold or used by any personal he name and address of any political committee to committee	
Full Name (Last, First, Middle Initial) Deborah G. Spak Mailing Address 1555 Stratford		Date of Receipt 10 16 2009
City Deerfield FEC ID number of contributing federal political committee.	State Zip Code IL 60015	Transaction ID: 2009111911211-173 Amount of Each Receipt this Period 13.56
Name of Employer Baxter International Inc. Receipt For: Primary Other (specify) ▼	Occupation Dir, Communications Aggregate Year-to-Date ▼ 294.42	1
Full Name (Last, First, Middle Initial) Deborah G. Spak Mailing Address 1555 Stratford		Date of Receipt 1 0 3 0 4 2 0 0 9
City Deerfield FEC ID number of contributing	State Zip Code IL 60015	Transaction ID: 20091119113017-178 Amount of Each Receipt this Period 13.56
Name of Employer Baxter International Inc. Receipt For: Primary General	Occupation Dir, Communications Aggregate Year-to-Date	
Other (specify) Full Name (Last, First, Middle Initial) Elizabeth F. Stoll	294.42	Date of Receipt
Mailing Address 975 Seaboard Ave City Atlanta	State Zip Code GA 30318	Transaction ID: 2009111911211-134 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	9.90
Name of Employer Baxter Healthcare Corporation Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Mgr Ii, State Govt Affairs Aggregate Year-to-Date ▼ 216.12	
SUBTOTAL of Receipts This Page (optional		37.02

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 106 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Columns	e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Elizabeth F. Stoll Mailing Address 975 Seaboard Ave City Atlanta FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General	State Zip Code GA 30318 C Occupation Mgr Ii, State Govt Affairs Aggregate Year-to-Date ▼	Date of Receipt 10 30 2009 Transaction ID: 20091119113017-137 Amount of Each Receipt this Period 9.90
Other (specify) ▼ Full Name (Last, First, Middle Initial) Donald J. Sullivan Mailing Address 910 W Cypress Drive City Arlington Heights FEC ID number of contributing federal political committee.	State Zip Code IL 60005	Date of Receipt M M
Name of Employer Baxter International Inc. Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Donald J. Sullivan	Occupation VP, Risk Management Aggregate Year-to-Date 880.00	Date of Receipt
Mailing Address 910 W Cypress Drive City Arlington Heights FEC ID number of contributing federal political committee. Name of Employer	State Zip Code IL 60005 C	Transaction ID: 2009111911211-158 Amount of Each Receipt this Period 40.00
Receipt For: Primary General Other (specify)	VP, Risk Management Aggregate Year-to-Date ▼ 880.00]
SUBTOTAL of Receipts This Page (optional) .		89.90

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 106 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Cor	nmittee		
Α.	Full Name (Last, First, Middle Initial) Donald J. Sullivan			Date of Receipt
	Mailing Address 910 W Cypress Drive			10 30 2009
	City Arlington Heights	State IL	Zip Code 60005	Transaction ID: 20091119113017-163
	FEC ID number of contributing federal political committee.	C	00003	Amount of Each Receipt this Period 40.00
	Name of Employer Baxter International Inc.	Occupation VP, Risk	on « Management	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 880.00	
В.	Full Name (Last, First, Middle Initial) Karenann Terrell			Date of Receipt
	Mailing Address 914 Queens Lanes	1 0 0 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: 20091119111110-164
	Glenview	<u>IL</u>	60025	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer Baxter International Inc.	+	ief Information Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4230.82	
C.	Full Name (Last, First, Middle Initial) Karenann Terrell	_		Date of Receipt
	Mailing Address 914 Queens Lanes			10 16 2009
	City Glenview	State IL	Zip Code 60025	Transaction ID: 2009111911211-170 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00025	192.31
	Name of Employer Baxter International Inc.	Occupation Cvp, Chi	on ief Information Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4230.82	
	SUBTOTAL of Receipts This Page (optional)			424.62
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	3)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 88 / 106 (check only one) X	
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Commercial purposes.	the name and add	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions	
Full Name (Last, First, Middle Initial) Karenann Terrell Mailing Address 914 Queens Lanes			Date of Receipt	
City Glenview	State IL	Zip Code 60025	1 0 3 0 2 0 0 9 Transaction ID: 20091119113017-175 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	n	192.31	
Name of Employer Baxter International Inc. Receipt For: Primary General Other (specify) ▼	Cvp, Chi	ef Information Officer Year-to-Date ▼ 4230.82		
Full Name (Last, First, Middle Initial) Ronald J. Trudeau Mailing Address 416 W Oakwood Dr			Date of Receipt 10 02 2009	
City	·			
Barrington FEC ID number of contributing federal political committee.	C	60010	Amount of Each Receipt this Period 25.00	
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)		n gineering e Year-to-Date ▼ 550.00		
Full Name (Last, First, Middle Initial) Ronald J. Trudeau			Date of Receipt	
Mailing Address 416 W Oakwood Dr	•		10 16 7 2009	
City Barrington	State IL	Zip Code 60010	Transaction ID: 2009111911211-1	
FEC ID number of contributing federal political committee.	C	00010	Amount of Each Receipt this Period 25.00	
Name of Employer Baxter Healthcare Corpora- tion Receipt For:		gineering		
Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00]	
SUBTOTAL of Receipts This Page (optional)		242.31	

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule for each category of th Detailed Summary Pag	e (check offly offe)
ny information copied from such Reports and a for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Cor	e name and address of any political comm	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
Daxter Fleatificare Folitical Action Col	mmuee	
Full Name (Last, First, Middle Initial) Ronald J. Trudeau Mailing Address 416 W Oakwood Dr		Date of Receipt
		10 30 2009
City	State Zip Code	Transaction ID: 20091119113017-1
Barrington	IL 60010	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP Ii, Engineering	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	550.	00
Full Name (Last, First, Middle Initial) Onelia Ann Vera	I	Date of Receipt
Mailing Address 619 Oleander Drive		10 02 2009
City	State Zip Code	Transaction ID: 20091119111110-13
Hallandale	FL 33009	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.89
Name of Employer Baxter Healthcare Corpora- tion	Occupation Assistant General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	66
Full Name (Last, First, Middle Initial) Onelia Ann Vera	I	Date of Receipt
Mailing Address 619 Oleander Drive		10 16 2009
City	State Zip Code	Transaction ID: 2009111911211-142
<u>Hallandale</u>	FL 33009	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.89
Name of Employer Baxter Healthcare Corpora- tion	Occupation Assistant General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2199.	66
SUBTOTAL of Receipts This Page (optional) .	1	226.78

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 90 / 106 (check only one) X 11a
ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Baxter Healthcare Political Action Co	mmittee		
Full Name (Last, First, Middle Initial) Onelia Ann Vera			Date of Receipt
Mailing Address 619 Oleander Drive			10 30 2009
City	State	Zip Code	Transaction ID: 20091119113017-14
Hallandale	<u>FL</u>	33009	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.89
Name of Employer Baxter Healthcare Corpora- tion	Occupation Assistant	n General Counsel	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	2199.66	
Full Name (Last, First, Middle Initial) Chris P. Vlautin	1		Date of Receipt
Mailing Address 4306 Arenzano Way			10 02 7 9 9
City	State	Zip Code	Transaction ID: 20091119111110-8
El Dorado Hills	CA	95762	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Mgr, Stat	n e Government Affairs	
Receipt For: Primary General	Aggregate	Year-to-Date ▼ 380.00	1
Other (specify) ▼	0 0	300.00	1
Full Name (Last, First, Middle Initial) Chris P. Vlautin	,		Date of Receipt
Mailing Address 4306 Arenzano Way			10 16 2009
City	State	Zip Code	Transaction ID: 2009111911211-89
El Dorado Hills	CA	95762	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Mgr, Stat	n e Government Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.00	
SUBTOTAL of Receipts This Page (optional)			140.89

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Con	e name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
Full Name (Last, First, Middle Initial)			
Chris P. Vlautin Mailing Address 4306 Arenzano Way			Date of Receipt 1 0 3 0 2 0 0 9
City	State	Zip Code	Transaction ID: 20091119113017-92
El Dorado Hills	CA	95762	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		20.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Mgr, State	e Government Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.00	
Full Name (Last, First, Middle Initial) Thomas Westerkamp			Date of Receipt
Mailing Address 1844 Wilson Place			10 16 2009
City	State	Zip Code	Transaction ID: 2009111911211-35
Arlington Heights	<u> L</u>	60004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		10.00
Name of Employer Baxter Healthcare Corpora- tion	, ' <u> </u>	ical Affairs	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) Thomas Westerkamp	1		Date of Receipt
Mailing Address 1844 Wilson Place			10 30 7 2009
City	State	Zip Code	Transaction ID: 20091119113017-36
Arlington Heights	<u> </u>	60004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		10.00
Name of Employer Baxter Healthcare Corpora- tion	+ +	ical Affairs	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 220.00	
SUBTOTAL of Receipts This Page (optional)			40.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 106 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	e name and address of any political committed	erson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Cheryl L. White Mailing Address 4069 Mayfield Street		Date of Receipt
City Newbury Park FEC ID number of contributing	State Zip Code CA 91320	Transaction ID: 20091119111110-15 Amount of Each Receipt this Period 148.85
Name of Employer Baxter Healthcare Corporation Receipt For: Primary Other (specify)	Occupation Cvp, Quality Aggregate Year-to-Date ▼ 3256.22	
Full Name (Last, First, Middle Initial) Cheryl L. White Mailing Address 4069 Mayfield Street		Date of Receipt 1 0 1 6 2 0 0 9
City Newbury Park FEC ID number of contributing federal political committee.	State Zip Code CA 91320	Transaction ID: 2009111911211-157 Amount of Each Receipt this Period 148.85
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	Occupation Cvp, Quality Aggregate Year-to-Date ▼ 3256.22	
Full Name (Last, First, Middle Initial) Cheryl L. White Mailing Address 4069 Mayfield Street		Date of Receipt
City Newbury Park FEC ID number of contributing	State Zip Code CA 91320	Transaction ID: 20091119113017-16 Amount of Each Receipt this Period 148.85
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General	Occupation Cvp, Quality Aggregate Year-to-Date ▼	
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	3256.22	446.55

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 93 / 106 (check only one) X	
A Oi	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
	Baxter Healthcare Political Action Co	mmittee			
	Full Name (Last, First, Middle Initial) Deborah K. Williams Mailing Address 3805 Fenchurch Rd			Date of Receipt	
	3803 FERCHURCH NO			10 02 2009	
	City	State	Zip Code	Transaction ID: 20091119111110-89	
	Baltimore FEC ID number of contributing	MD	21218	Amount of Each Receipt this Period 50.00	
	federal political committee.	C		50.00	
	Name of Employer Baxter Healthcare Corpora-	Occupatio			
	tion Receipt For:	Dir, Publ	e Year-to-Date		
	Primary General Other (specify) ▼	, iggiogate	1100.00		
_	Full Name (Last, First, Middle Initial) Deborah K. Williams			Date of Receipt	
	Mailing Address 3805 Fenchurch Rd			10 16 2009	
	City	State	Zip Code	Transaction ID: 2009111911211-91	
	Baltimore	MD	21218	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		50.00	
	Name of Employer Baxter Healthcare Corpora-	Occupatio Dir, Publ			
	tion Receipt For:	_ 	e Year-to-Date ▼		
	Primary General Other (specify) ▼		1100.00		
_	Full Name (Last, First, Middle Initial) Deborah K. Williams	1		Date of Receipt	
	Mailing Address 3805 Fenchurch Rd			10 30 2009	
	City	State	Zip Code	Transaction ID: 20091119113017-94	
	Baltimore	MD	21218	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		50.00	
	Name of Employer Baxter Healthcare Corpora- tion	Occupatio Dir, Publ	ic Policy		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1100.00		
	SUBTOTAL of Receipts This Page (optional) .	1		150.00	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS) /)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 94 / 106 (check only one)
Any information copied from such Reports or for commercial purposes, other than usin	and Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action	Committee		
Full Name (Last, First, Middle Initial) Vernon E. Williams			Date of Receipt
Mailing Address 1601 Wyndham C	Court		10 02 2009
City <u>Santa Ana</u>	State CA	Zip Code 92705	Transaction ID: 20091119111110-131 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer Baxter Healthcare Corpora- tion		mation Technology	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) Vernon E. Williams	I		Date of Receipt
Mailing Address 1601 Wyndham C	Court		10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State CA	Zip Code	Transaction ID: 2009111911211-135
Santa Ana FEC ID number of contributing federal political committee.	C	92705	Amount of Each Receipt this Period 50.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Infor	n mation Technology	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) Vernon E. Williams			Date of Receipt
Mailing Address 1601 Wyndham C	Court		10 30 2009
City Santa Ana	State CA	Zip Code 92705	Transaction ID: 20091119113017-138
FEC ID number of contributing federal political committee.	C	32703	Amount of Each Receipt this Period 50.00
Name of Employer Baxter Healthcare Corpora- tion		mation Technology	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (option	nal)		150.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 / 106 (check only one) X
ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	e name and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
/ Baxter Healthcare Political Action Co	mmuuee		
Full Name (Last, First, Middle Initial) Ron K. Wilson			Date of Receipt
Mailing Address 6800 Red Rock Road			10 02 2009
City	State	Zip Code	Transaction ID: 20091119111110-10
Amarillo	TX	79118	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Sales Re	n presentative lii	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	360.00	
Full Name (Last, First, Middle Initial) Ron K. Wilson	1		Date of Receipt
Mailing Address 6800 Red Rock Road	I		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 2009111911211-104
Amarillo	TX	79118	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Sales Re	n presentative lii	
Receipt For:	Aggregate	Year-to-Date ▼	_
Primary General Other (specify) ▼		360.00	
Full Name (Last, First, Middle Initial) Ron K. Wilson			Date of Receipt
Mailing Address 6800 Red Rock Road	I		10 30 2009
City	State	Zip Code	Transaction ID: 20091119113017-10
<u>Amarillo</u>	TX	79118	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Sales Re	n presentative lii	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	
SUBTOTAL of Receipts This Page (optional)			60.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 96 / 106 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Col	mmittee	
Full Name (Last, First, Middle Initial) Subramaniam Yogendran		Date of Receipt
Mailing Address Baxter Healthcare Co One Baxter Parkway		10 02 7 2009
City <u>Deerfield</u>	State Zip Code IL 60015	Transaction ID: 20091119111110-104 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼	Occupation VP, U.S. Supply Chain Aggregate Year-to-Date ▼ 1065.72	
Full Name (Last, First, Middle Initial) Subramaniam Yogendran	. [Date of Receipt
Mailing Address Baxter Healthcare Co One Baxter Parkway	10 16 2009	
City Deerfield	State Zip Code	Transaction ID: 2009111911211-106
FEC ID number of contributing federal political committee.	IL 60015	Amount of Each Receipt this Period 50.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, U.S. Supply Chain	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1065.72	
Full Name (Last, First, Middle Initial) Subramaniam Yogendran		Date of Receipt
Mailing Address Baxter Healthcare Co One Baxter Parkway	rp. One Baxter	10 30 2009
City Deerfield	State Zip Code IL 60015	Transaction ID: 20091119113017-109 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, U.S. Supply Chain	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1065.72	
SUBTOTAL of Receipts This Page (optional) .		150.00
TOTAL This Period (last page this line numbe	·	

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 97 / 106 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pers the name and address of any political committee to	on for the purpose of soliciting contributions
Baxter Healthcare Political Action C	ommittee	
Full Name (Last, First, Middle Initial) Todd S. Young		Date of Receipt
Mailing Address Baxter Expatriate Ac PO Box 747	dmin PO Box 747	10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 2009111911211-180
Deerfield	IL 60015	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer Baxter World Trade Corpor- ation	Occupation Away on Assignment	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	220.00	
Full Name (Last, First, Middle Initial) Todd S. Young		Date of Receipt
Mailing Address Baxter Expatriate Ad PO Box 747	dmin PO Box 747	10 30 2009
City	State Zip Code	Transaction ID: 20091119113017-18
Deerfield	IL 60015	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer Baxter World Trade Corpor- ation	Occupation Away on Assignment	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	220.00	
Full Name (Last, First, Middle Initial) Mahshid R. Zahed		Date of Receipt
Mailing Address 1175 N Museum Blv Unit 301	rd. Unit 301	10 30 7 2009
City	State Zip Code	Transaction ID: 20091119113017-11
Vernon Hills	IL 60061	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Quality Gis	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	70.00
TOTAL This Period (last page this line numb	por only)	15264.75

		Use separate schedule(s)			IE NU nly or		.1 1.		FAC	iE 98	100
11	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	\Box	22 28a	23 28b	\square	24 28c	25 X 29	26
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam											
Λ	NAME OF COMMITTEE (In Full)											
	Baxter Healthcare Political Action Commit	tee										
	Full Name (Last, First, Middle Initial) Bill Purcell Campaign							action II)8402F	AF3AE
	Mailing Address 1301 Dunbar Drive						1 ^M 0		2 9	/ Y	ž o ŏ	9 Y
	City	State Zip Code					Amou	int of Eac	h Disb	oursem	ent this	Period
	Laurinburg	NC 28352									250.0	10
	Purpose of Disbursement Nonfederal Contribution			011			-				230.0	,0
	Candidate Name		Ca	atego Type								
	Senate President	ement For: Primary General Other (specify)	•									
_	State: District:					+						
	Full Name (Last, First, Middle Initial) Bob England Campaign						Date	saction II of Disbur	semen			57C174
	Mailing Address PO Box 908						1 [™] 0	M / D	29	/	žoŏ	9
	City Ellenboro	State Zip Code NC 28040					Amou	int of Eac	h Disb	oursem		
	Purpose of Disbursement Nonfederal Contribution			011							250.0	00
	Candidate Name			atego Type	-							
	Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼	!									
	Full Name (Last, First, Middle Initial) Citizens for Wagoner							action II	•		17D86	A6C6C5
	Mailing Address 7445 Airport Highway						1 ^M 0	M / D	29	/ Y	žoŏ	9
	City Holland	State Zip Code OH 43528					Amou	int of Eac	h Disb	oursem		
	Purpose of Disbursement Nonfederal Contribution			011							250.0	00
	Candidate Name			atego Type								
	Senate President	ement For: Primary General Other (specify)	•									
_	State: District:											
1	UBTOTAL of Disbursements This Page (optional)									-	750.0	10

		3 (FEC Forn	_		arate schedule(s)		FOR LINE NUMBER: PAGE 9 (check only one)		99 / 10	6				
		SBURSEME		Detailed	category of the Summary Page		21b 27	É	22 28a	23 28b		X	25 29	26 30
		ed from such Repo poses, other than												
NAME	E OF COM	/IITTEE (In Full) are Political Act			, μ									
	lame (Last,	First, Middle Initial))							saction II of Disbur	D : 4550	7B05F	C215	CB3
	ng Address	PO Box 310									29 /	Ý Ž) 0 9 °]
City Tarbo	oro			State NC	Zip Code 27886				Amou	int of Eac	h Disbur	sement	this Pe	riod
Purpo	ose of Disbu					Г	011					25	0.00	_
Candi	idate Name					Ca	ategory/ Type							
Office State:	e Sought:	House Senate President District:	Disburse	ment For: Primary Other (spe	General ecify) ▼									
Full N	lame (Last,	First, Middle Initial) Elect Cliff Hite	<u> </u>							saction II of Disbur	D: 2961 sement	8D0A	66DA9	 98F9
Mailin	ng Address	2417 Westm	oor Road						1 ^M 0	M / D	29 /	ž	o ŏ ə ˇ	
City Findle	lay			State OH	Zip Code 45840				Amou	int of Eac	h Disbur	sement	this Pe	riod
	ose of Disbu ederal Contri						011		L.			25	0.00	
Candi	idate Name						ategory/ Type							
Office State:	e Sought:	House Senate President District:	Disburse	ement For: Primary Other (spe	General ecify) ▼									
Full N	lame (Last,	First, Middle Initial) Campaign)							of Disbur		988A3	5012A	DF2
Mailin	ng Address	100 N. Tryor 47th Floor	Street						1 ^M 0	M / D	29 /	Ž () 0 9 °]
City Charl	lotte			State NC	Zip Code 28202				Amou	int of Eac	h Disbur			riod
Nonfe				011		L.			25	0.00	-			
	idate Name		1 5: :				ategory/ Type							
	e Sought:	House Senate President	Disburse	ement For: Primary Other (spe	General ecify) ▼									
State:	:	District:							_					
	TAL of Diolo	ursements This Pa	(1' 1)									75	0.00	

		Use separate schedule(s		FOR LII (check d			H:	L	PAGE	100 / 106
ΙΤ	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27		2 8a	23 28b	24	-	25 <u>26</u> 29 30
	y Information copied from such Reports and State for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Commi	ne and address of any politica								
<u>V_</u>	Full Name (Last, First, Middle Initial) David Hoyle Campaign Mailing Address PO Box 2567					ate c	of Disbur	sement		304457882) 0 9 °
	City Gastonia Purpose of Disbursement	State Zip Code NC 28053			A	mou	nt of Eac	h Disbur		this Period
		ement For:	Cat	egory/ ype						
	Senate President State: District: Full Name (Last, First, Middle Initial)	Primary General Other (specify) ▼			1				5CA8E	2EBCF36
	Doug Berger Campaign Mailing Address PO Box 1101					^M 0		29) 0 9 Y
	City Youngsville Purpose of Disbursement Nonfederal Contribution Candidate Name	State Zip Code NC 27596	Cat)11 egory/	_	mou	nt of Eac	h Disbur		0.00
	Senate President State: District:	ement For: Primary General Other (specify)	I	<i>.</i>						
	Full Name (Last, First, Middle Initial) Friends of Armond Budish					ate o	of Disbur	sement		'BE163433
	Mailing Address 23240 Chagin Blvd Building 4, Suite 450	0				1 0		29 /) 0 9 °
	City Beachwood Purpose of Disbursement	State Zip Code OH 44122			_ A	mou	nt of Eac	n Disbur		this Period 0.00
	Nonfederal Contribution Candidate Name		Cat)11 egory/ ype				•		
	Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼								
	UBTOTAL of Disbursements This Page (optional)					-			100	

CHEDULE B (FEC Form 3X)	Use separate schedul		DR LINE NUMBER: PAGE 101 / 10		
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Friends of Senator Jane Nelson			Date of Disburse		
Mailing Address P.O. Box 608			10 ^M 2	7 2009	
City Grapevine	State Zip Code TX 76099		Amount of Each	Disbursement this Period	
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Jimmy Stewart for State Senate				Date of Disburs	
Mailing Address 1021 Four Mile	Creek Rd			10 / 0	29 7 2009
City Coolville	State OH	Zip Code 45723		Amount of Eac	h Disbursement this Period
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John Zerwas Campaign			Date of Disburs	ement 2 7 2 0 0 9
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Martin Nesbitt Campaign			Date of Disburs	ement
Mailing Address 29 N Market Street 7th Floor			10	29 7 2009
City Aheville	State Zip Code NC 28801		Amount of Each	Disbursement this Period
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NAME OF COMMITTEE (in Full) Baxter Healthcare Political Action Committee Full Name (Last, First, Middle Initial) Mickey Michaux Campaign Mailing Address PO Box 2152 City State Zip Code Durham NC 27702 Purpose of Disbursement Nontederal Contribution Candidate Name City State Zip Code NC 28752 City State District: Full Name (Last, First, Middle Initial) Mitch Gillesple Campaign Mailing Address 185 Cross Creek North Ridge Drive City State Zip Code NC 28752 City State Zip Code NC 27502 City State Zip Code NC 28752 City State Zip Code NC 28752 City State Zip		Detailed Summary Page	27	28a 28b	28c X 29 3
Baxter Healthcare Political Action Committee					
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	y Information copied from such Reports and State for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Commi	e and address of any political									
	Full Name (Last, First, Middle Initial) Phil Berger Campaign Mailing Address PO Box 1309					Date	of Disbu	_		818D3	BBAB709
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	ny Information copied from such Reports ar r for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action (the name and address of any		
Α.	Full Name (Last, First, Middle Initial) Stan Bingham Campaign Mailing Address 292 North Main S	itreet		Transaction ID: CFFC3FA55A98879AFC3 Date of Disbursement 10 M / D 2 9 / Y 2 0 0 9
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В.	Full Name (Last, First, Middle Initial) Texans for Dan Patrick Mailing Address PO Box 70073			Transaction ID: D23AC3BA564046D762A Date of Disbursement M M / D2 D / Y Y Y O Y O Y
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